

## APPEAL FOR LATE WITHDRAWAL/DROP

**Do not complete this form if you are you appealing for medical or health related issues.** Contact the Student Affairs Office by phone at 785-628-4277 or by email at [cgist@fhsu.edu](mailto:cgist@fhsu.edu) for assistance regarding a medical appeal. More detailed instructions on completing this form are included on page 2.

FHSU ID	Last Name	First Name	MI	Date of Birth (MM/DD/YY)
Street Address		City	State	Zip Code

Are you receiving financial aid (i.e. loans, scholarships, work study, grants, etc.)  YES  NO

**I am appealing for a late Withdrawal/Drop for the following course(s):**

Year/Term the course(s) were taken	Course (e.g., ACCT 203)	Section (e.g., A, VB)	Course Title (e.g., Principles of Accounting 1)	Credit Hours (e.g.,3)
Year				
Term (Fall, Intersession, Spring, Summer)				

**For the above listed course(s), I am requesting**

<input type="checkbox"/>	<b>Withdraw After Deadline:</b> I missed the <b>FINAL DEADLINE</b> to with draw from the course(s) above. I am requesting to be withdrawn after the deadline. If approved, withdrawal will be noted with a “W” on my transcript.
<input type="checkbox"/>	<b>Withdrawal with a Tuition Refund (Drop):</b> I am requesting a refund of tuition for the courses noted above of
<input type="checkbox"/>	50% or <input type="checkbox"/> 100% . Courses that receive a tuition refund do not receive a transcript notation.

**I have read the instructions on the second page and understand that:**

- I must attach a letter of explanation and documentation of my extenuating circumstances.
- If approved to withdraw late, my withdrawal will be noted with a “W” on my transcript.
- Appeals must be submitted no later than one term following enrollment in the course.
- By submitting this form and other pertinent documentation, I understand that I **AM NOT** guaranteed approval.
- All decisions by the Academic Appeals committee are final and not subject to further review.

Student’s Signature	Daytime Phone Number	Date
---------------------	----------------------	------

*Required Signature: I certify the information provided in this appeal is true and accurate without evasion or misrepresentation. I understand if this information is found to be false or misleading, this fact alone will be sufficient cause for this appeal to be denied.*

## Appeal Late Withdrawal/Drop Information

The Appeal Form is used to request a waiver of University Policy. For example, you might feel you had special circumstances where you need to drop a course after the University deadline or wish to request a different percentage refund other than the amount you received. Doing poorly in a course is not justification for submitting this appeal.

Appeals to withdraw late or obtain a tuition refund may be granted only for severe, extenuating circumstances, such as a natural disaster, military active duty activation, a death of the immediate family, etc.

**DO NOT COMPLETE THIS FORM IF YOU ARE APPEALING FOR MEDICAL OR HEALTH RELATED ISSUES.** Contact the Student Affairs Office by phone at 785-628-4277 or by email at [cgist@fhsu.edu](mailto:cgist@fhsu.edu) for assistance regarding a medical appeal.

**Appeals for a late withdrawal must be submitted with documentation within one term** of your enrollment in the class or classes for which you are appealing. If you have extenuating circumstances to withdraw from some of your courses, you must explain how these circumstances did not affect your performance in any courses you would like to keep on your schedule.

Documentation must be included with the appeal and **must show how the extenuating circumstance prevented withdrawal by the deadline date.**

Tuition refund and course withdrawal deadlines are available on the Registrar's Office website at, <http://www.fhsu.edu/registrar/Semester-Course-Drop-and-Withdrawal-Policy/>, for Fall, Intersession, Spring, and Summer terms. It is the student's responsibility to be aware of these deadlines.

### Appeal for Late Withdrawal/Drop Instructions

1. Include a typed explanation of your extenuating circumstances with the appeal. Any assertions you make in your explanation must be documented.
2. Include official documentation of the extenuating circumstances (e.g., police report, military orders, letter from employer, etc.), listing specific dates relevant to your appeal. **Appeals submitted without sufficient documentation will be denied.**
3. Documentation submitted should accompany this form and submitted at the same time. Any documentation provided cannot be returned.
4. Appeals must be submitted no later than one term following enrollment in the course.
5. Statements from an instructor(s) or advisor are accepted, but are not required.
6. Submit appeal in person, by mail, email, or fax as follows:
  - In Person: Registrar's Office, Picken Hall Room 302
  - Mail: Registrar's Office, 600 Park St., Hays, KS 67601
  - Email: [registrar@fhsu.edu](mailto:registrar@fhsu.edu)
  - Fax: 785-628-4085

The Academic Appeals Committee meets every other week. If you have not received any communication within two weeks of submitting your complete appeal, please contact the Registrar's Office. Official notification will be sent to your FHSU email within a few days after the Committee meets.