Petition To Appeal Financial Charges Based On Official Date Of Withdrawal From Valparaiso University

Name _____ ID Number _____

Mailing Address _____ Phone (____) _____
Street

_____ E-mail _____
City State Zip

Semester/Year: _____

The official date of withdrawal, to be recorded in the student's academic record and used to calculate any refund and repayment due, will be the date that the student officially notifies the University of the intent to withdraw.

In the event of extraordinary circumstances by which a student is prevented from completing the withdrawal process in a timely manner (illness, accident, grievous personal loss, or other circumstances beyond the student's control), a student may appeal the date of withdrawal by submitting a written statement outlining the circumstances and providing supporting documentation (e.g., letter from attending physician, etc.). This appeal must be submitted to the Office of the Registrar **within 14 days of the actual date of withdrawal.**

It should be understood that exceptions to the official date will necessarily be limited to those situations in which the ability to complete the withdrawal process in a timely manner was outside the student's control. Appeals will be considered by a committee convened by the Registrar.

Please outline below the circumstances on which you are basing your appeal (attach extra pages if necessary), include supporting documentation, and return to:

The Office of the Registrar, Kretzmann Hall, Valparaiso University, Valparaiso IN 46383

1. Did you attend any classes the semester you withdrew? Yes _____ No _____

2. If yes, what was the last date you attended class? _____

3. What date do you believe should be used as your official withdrawal date? _____

4. Were there extraordinary circumstances preventing you from completing the withdrawal process earlier than your officially recorded date of withdrawal? If yes, please explain. Supporting documentation must be attached (e.g., doctor's statement, hospital bill, police report, etc.)

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_____

Signature _____ Date _____

For Office Use Only:

Rec'd Date _____ Action _____

Official WD Date _____ Signature _____ Date _____