Procedures for Appeal:

- Submit this petition along with any supporting documentation in person, by fax, or U.S. mail to the WVC Admissions & Records Office.
- **Academic Appeal must include** an explanation of the contributing factors and **documentation of those circumstances when applicable.**
- Examples of **documented extenuating circumstances are:** serious illness, severe injury, car accident, death in the family, etc., which affected the reasons for your appeal. A wrong or difficult class, too many units in the term, bad time management, transportation issues, too many work hours, etc. are **NOT** extenuating circumstances.
- **All Academic Appeals will be reviewed by the Academic Appeals Committee. The student will be notified of the decision by email including written committee recommendations and requirements. The decision of the Committee is final. No in-person appeals will be considered.**
- **Petitions are processed and emailed every Friday (excluding holidays).**
  (If you have changed your email since you applied, please make sure we have your most current email)
- Approval of this petition has no bearing on decisions made regarding financial aid.

Appeal Descriptions:

**Course Repetition:**

Students may repeat a course three times with a substandard grade or “W.” A total of four times will be permitted under the **documented extenuating circumstances.** A substandard grade is less than a “C”.

**Refund/Fees Waived:**

Full refund for semester length classes dropped within the deadline dates. Drop deadlines are posted on the college website.

**Academic Renewal:**

Previously recorded substandard academic performance may be disregarded if it is not reflective of a student’s demonstrated ability. Student **must** meet academic renewal criteria posted on the college website or in the catalog.

**Readmission:**

A student who has been dismissed may request reinstatement by submitting a petition for readmission after an absence of one semester or a petition for readmission explaining extenuating circumstances during the semester on which the dismissal was based.

**Drop with “W”:**

A student may withdraw from a semester length class through the end of the 2nd week and no notation will be made on the student’s academic record. In courses of less than a regular semester’s duration, a student may withdraw prior to the completion of 10% of the period of instruction, and no notation will be made on the student’s record.
Submit completed form to the Admissions & Records Office.

Name:

Last

First

M.I.

E-Mail Address:

College I.D. Number:

Phone #:

**PLEASE LIST COURSE(S) RELATED TO THIS PETITION.**

<table>
<thead>
<tr>
<th>Semester / Year</th>
<th>Course Name (eg: Engl 1A)</th>
<th>Section # (eg: 94321)</th>
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**FOR THE COURSES LISTED ABOVE, I AM REQUESTING THE FOLLOWING:**

- **Refund/Fees Waived**
  - Supporting documentation required.
  - Approved
  - Denied

- **Drop Without “W”**
  - Supporting documentation required.
  - Approved
  - Denied

- **Course Repetition**
  - Approved
  - Denied

- **Academic Renewal**
  - Approved
  - Denied

- **Drop With “W”**
  - Supporting documentation required.
  - Approved
  - Denied

- **Readmission**
  - Must attach an Educational Plan.
  - Approved
  - Denied

- **Other**
  - Approved
  - Denied

Student’s justification for request: (Please use a separate sheet, if necessary.)

____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________

Student Signature: ___________________________ Date: ___________________________

Counselor Comments: (Required for Petition for Readmission.)

____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________

Counselor Signature: ___________________________

Comments: _______________________________________________________

____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________

Academic Appeal Petition Committee Chair’s Signature: ___________________________ Date: ___________________________