



PASADENA CITY COLLEGE PETITION DUE TO SPECIAL CIRCUMSTANCES

This petition may be used to request an exception to certain deadlines or procedures due to the existence of verifiable extenuating circumstances. Only one request may be submitted per petition. Students are responsible for providing the required personal statement and documentation. Failure to provide both will result in the petition being denied. You will be notified of the outcome via the email you indicate on this form.

EXTENUATING CIRCUMSTANCES: are verifiable cases of accident, illness or other circumstances beyond the control of the student. Acceptable forms of documentation include doctor's notes; proof of hospitalization or acting as a relative's caregiver; police reports of accident, etc. Documentation must show that circumstances interfered with a student's ability to successfully complete the class or drop it by the deadline.

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NAME _____ LANCER ID # _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____ DATE OF BIRTH _____

COURSE ID _____ TERM/YEAR _____ EMAIL _____

PHONE NUMBER _____

INSTRUCTIONS

- Check only one box per petition
- Attach the required documentation (not required for additional units, anti-requisite override)
- Attach your personal statement – see below for details*

I AM PETITIONING FOR THE FOLLOWING EXCEPTION:

- Approval for _____ additional units in excess of maximum units allowed. (Required explanation and list of courses)
- Grade change to "W" or Late Withdrawal - Provide all of the following:
- Personal statement explaining circumstances that prevented you from dropping the class by the deadline
 - Verifiable documentation of extenuating circumstances to support your personal statement
- Late Add (Signed add slip with first date of attendance from instructor required)
- Provide your personal statement explaining what prevented you from adding the class on time.
- Anti-Requisite Override
- Other (Typed explanation required, documentation of circumstances may be required)

Student Signature

Today's Date

OFFICE USE ONLY

_____ Approved _____ Denied

Reason for denial: _____

Approved By Date Recorded By Date Response By Date