

## Late Course Withdrawal Petition

\*\*only for students whose primary major is in SPHHS \*\*

Please complete this petition if you are requesting to drop a class after the mid-semester date due to extenuating circumstances. Withdrawing from a course after the add/drop period or mid-semester date will result in a “W” on your transcript for the specified course. Dropping below full-time status (12 credits) might affect your financial aid or scholarships. Please contact the Bursar’s Office with any questions. International students must take a minimum of 12 credits each semester.

### Instructions

- Complete the petition and include relevant supporting documentation.
- Email or bring the petition and supporting documentation to a SPHHS Student Success Advisor:  
Tracy Eason: [taeason@umass.edu](mailto:taeason@umass.edu), 114 Arnold House
  - Public Health and Nutrition majors
  - SPHHS Exploratory Track (for students with last name starting with A-K)
- Torin Moore: [tymoore@umass.edu](mailto:tymoore@umass.edu), 111 Arnold House
  - Kinesiology and Communication Disorders majors
  - SPHHS Exploratory Track (for students with last name starting with L-Z)

### I. Student Information

Name: \_\_\_\_\_ Email: \_\_\_\_\_@umass.edu Date: \_\_\_\_\_

SPIRE ID: \_\_\_\_\_ Primary Major: \_\_\_\_\_ Phone #: \_\_\_\_\_

### II. Course Information- If your request is for more than one course, please attach an additional page with course details.

Semester & Year (e.g. Fall 2018) \_\_\_\_\_ Course Dept. & Number (e.g. KIN 100) \_\_\_\_\_

Course Title \_\_\_\_\_

Instructor’s Name \_\_\_\_\_

Five Digit Class Number \_\_\_\_\_ Section \_\_\_\_\_ Credits \_\_\_\_\_

Five Digit Lab/Discussion Number \_\_\_\_\_ Section \_\_\_\_\_

### III. Reason For Request- The following may be an acceptable reason for a late course withdrawal. Supporting documentation is required\*. If you are unable to provide documentation, please explain why. Poor academic performance or trying to boost your GPA are not grounds for a late course withdrawal. Check all that apply.

- Never attended (attendance and performance will be confirmed by the instructor)
- Personal or family illness
- Personal and/or family difficulties
- Other (be specific)

\*Examples of appropriate documentation include proof of hospital stay, copy of obituary, or letters from a physician, mental health professional, or counselor

**IV. Explanation-** Briefly explain your request. Describe how the extenuating circumstance affected your academic work in the specified course.

**V. Mid-Semester Date-** Please explain why you did not withdraw from course before the mid-semester date.

**VI. Resources-** If applicable, indicate which people or resources on- or off- campus will provide you with support moving forward.

**VII. Additional Information-** Is there any other information you would like to provide to justify your request?

**VIII. Signature-** I understand that the SPHHS Center for Student Success Committee and Academic Dean will review the appeal. The decision may take up to three weeks. I understand that I must continue to attend the course(s) that I am requesting a late withdrawal(s) until I am notified that the late withdrawal(s) was approved. I understand that I need to provide supporting documentation. I will speak with my academic advisor about how the withdrawal might affect my academic plan.

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Student Signature

Date

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**Academic Dean's Office & Center for Student Success Use Only**

Type of Documentation Submitted \_\_\_\_\_

Decision (Associate Dean or Director of CSS initials): Approved \_\_\_\_\_ Denied \_\_\_\_\_ Date \_\_\_\_\_

Date student was emailed of decision: \_\_\_\_\_ Initial: \_\_\_\_\_

Date for documenting decision in advising notes: \_\_\_\_\_

Comments: