CLASS DROP GRADE APPEAL FORM
Extenuating Circumstance

If you are struggling in any course, please contact your instructor or advisor as soon as possible to learn about the many ways NWTC can help you succeed. We are here to help!

If you are a financial aid recipient or receive funding from other sources, please be advised that changes to your enrollment may affect your current and future eligibility. Changes may also impact sequential progress toward graduation. Please contact the Financial Aid Office or your Advisor before making any changes to your enrollment.

CLASS DROP PROCEDURE:

1. The Class Drop Grade Appeal Form must be used after the 60% class completion date.
2. All information is to be completed by the student including the reason for drop. **If the student has already completed the class and a grade has been assigned, including a NS (no show), this form cannot be used.** Contact Enrollment Services for further assistance.
3. Student must provide proof of extenuating circumstance. Attach all appropriate documentation to this form. See below for examples of extenuating circumstances. Failure to provide the required documentation may result in your appeal being denied.
4. The student takes the form to the instructor for their signature. (If the instructor is not available, the Dean/Associate Dean's signature is acceptable).
5. If the instructor approves the request, they must sign and date the form. The student is to return the form to the Welcome Center or mail it to NWTC; Attn: Enrollment Specialists, 2740 W Mason St., Green Bay, WI 54307-6042.
6. **The instructor is not required to sign the form if the drop is denied.**   If the instructor denies the request, it is not necessary to proceed further.
7. NWTC staff will drop the appropriate class, provide confirmation to the student, and sign and date the drop form.
8. A grade of "W" will then be assigned. There will be no refund after the 60% class completion date.
9. The student is to retain the class schedule as confirmation of drop.

Examples of extenuating circumstances:
⇒ **Medical Appeals** - A letter from treating physician, on office letterhead, indicating the date student was first treated for the medical problem, and how the problem affected the student's ability to complete coursework during the same semester for which appeal is requested (Letter must be mailed directly by physician to the appropriate NWTC staff.)
⇒ **Personal or Family Problems** - A statement, on office letterhead, from a doctor, therapist, clergyperson, academic advisor, or other appropriate person(s), who can verify when the specific problem first occurred and how it affected student's academic studies. (Letter must be mailed directly from the attending professional to the appropriate NWTC staff.)
⇒ **Death/Immediate Family (parents, siblings, spouse or child)** - A copy of the death certificate, memorial card, or obituary that references student's name and the deceased family member.
Care of an immediate family member – A letter from your family member's physician, on office letterhead, which states the name of student required to care for the immediate family member. The letter must include dates student is required to provide the care.
⇒ **Work Related Problems** - A statement from student's employer, on office letterhead, stating the nature of the circumstances, and how the circumstances affected student's academic studies. If the problem was a change in work hours, the employer must also include the date the change in hours took place and whether the change was mandatory.

NORTHEAST
WI Technical College

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One form required per class

Date _____

Student ID _____   OR SSN _____   Phone Number _____

Last Name _____   First Name _____   MI _____

Class Title	Class #	Catalog Number	Start Date
Reason for drop:			

Instructor or Dean/Associate Dean Signature _____   Date _____

I understand this request is valid seven days from the above signature's date.

Student Signature _____   Date _____

Please attach all appropriate documentation to this form.

FOR OFFICE USE ONLY:	Completed by	Date