

Instructions

Do not hand write - Must be typed

- If you are a graduate or credential student petitioning to late or retroactively drop or semester withdraw from regular or special session classes, but not Open University classes, use this form.
- If you are an undergraduate, credential, or graduate student petitioning to drop or withdraw from an Open University class, use the forms on the Registrar's website (at <http://www.sjsu.edu/aars/forms/Fall2015%20Petition%20for%20Drop%20Course.pdf> for dropping a course and at <http://www.sjsu.edu/aars/forms/Fall2015%20Petition%20for%20Withdrawal.pdf> for semester withdrawal).
- If you are an undergraduate petitioning to drop a class of any kind, including graduate-level classes, use one of the forms above on the Registrar's website.

After the Drop Deadline, it is rare for individual course drops to be approved. Following a semester, it is extremely rare. An approval of a course drop requires strong reasons why one or more courses should be treated differently than others enrolled in during the same term. Dropping because of poor performance or too heavy a load will not be permitted. A change in GPA resulting from a retroactive drop or withdrawal will not change academic standing in the semester in which the course was taken. Follow these instructions carefully:

1. All required documentation must be attached, including unofficial transcripts and candidacy form, if it has been filed with GAPE.
2. Extenuating circumstances that disrupted the scholastic performance and prevented drops during the semester must be explained in a separate attachment. You are not required to provide any additional medical information beyond that included in the HPVMC form, but you are not prevented from doing so in your personal statement. However, in the personal statement for course drops, it must be explained why any individual courses are to be treated differently from the ones not dropped. If the circumstances were medical, you can submit the Healthcare Provider Verification of Medical Conditions (HPVMC) form fully filled out and signed. Attach this petition, completed except for signatures, to the HPVMC form for your healthcare provider to see. Once the form is completed by the provider, take both to the signers of the petition for the signatures. All personal medical information will be kept confidential among the signers of the petition.
3. Signatures from the course instructor (for course drops only), department graduate advisor, department chair or school director, and college associate dean must be obtained. Consult the list of departments at http://www.sjsu.edu/academics/colleges_departments/ to determine the associate dean to which to submit the form or take the form to your college office.
4. This petition should be returned to Graduate Studies, a branch of Graduate and Undergraduate Programs, in ADM 223B.

Student Information

Last Name	First Name, M.I.			
Student ID	Previous Name (if any)			
Current Address	City	State	Zip Code	
Daytime Phone	Email Address			

Withdrawal Information

Semester Withdrawal

Semester to be Withdrawn	Applied for Graduation	Yes	No	Anticipated Graduation Date
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Course Drop (fill out one form per course)

Course Title	Units
Course Prefix (e.g., English)	Catalog Number (e.g., 1A)
	Semester Year (e.g., Fall 2012)

Required Attachments (photocopies are acceptable)

- Complete SJSU transcripts
- Candidacy form, if filed with GAPE
- Personal statement with explanation of reasons (see above at No. 2 if citing medical reasons)
- Documentation of extenuating circumstances, Healthcare Provider Verification of Medical Condition form, or other documentation if citing medical circumstances

Recommendation (letter may be attached for additional support)

Course Instructor (for informational purposes only; no approval or disapproval needed)

Name	Signature	Date
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Course Grade at this point in the semester (to be furnished by course instructor)

Departmental Graduate Advisor

Recommendation	Yes	No	Name	Signature	Date
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Department Chair or School Director

Recommendation	Yes	No	Name	Signature	Date
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College Associate Dean

Recommendation	Yes	No	Name	Signature	Date
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Required Signatures

Student Name	Signature	Date
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Associate Dean, Graduate Studies

Recommendation	Yes	No	Name	Signature	Date
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Notes