



APPEAL FOR AN EXCEPTION TO THE WITHDRAWAL POLICY

Terms: If you have not paid for tuition/fees, did not officially drop a class that you have stopped attending, or never attended by the stated refund deadlines, you are STILL held responsible for payment of the tuition and fees owed to the institution.

 Student Name

 Student ID

(_____) (_____) _____ @hawaii.edu
 Phone Number UH E-Mail

PLEASE NOTE: Appeals should be filed within the semester in question. All appeals must be submitted no more than 45 days after the semester in question. Requests for appeals submitted after the 45 days are considered on a case by case basis. It is suggested for you to meet with a counselor to discuss your all of your options prior to submitting this request.

If you decide to proceed with the appeal process, you must follow these steps:

1. REQUEST – I am requesting (check all that apply):

A. Change in Registration

Withdrawal from: _____ Last date of Attendance: _____
 (semester/ year)

(If you need to be withdrawn from any classes, please attach the Add/Drop form with the class(es) you need to drop to this appeal.)

- A. Complete (from all courses that semester) With 'W' grade (course remains on transcript)
- Partial (from only some courses)
- Late (after withdrawal date but within semester) Retroactive (after the semester listed above)

B. Tuition Refund for semester listed above

(*Consideration for tuition refunds are based ONLY on extenuating circumstances):
 100% tuition refund 50% tuition refund 0% tuition refund

2. SPECIAL CLASSIFICATIONS: (Please check all that apply. If you mark “yes” to any one of these classifications, it is advised that you speak to the counselor or representative in the area so you are aware of any consequences pertaining to this request.)

- Are you receiving Financial Aid (includes grants, loans, scholarships, and work study)? Yes No
- Are you receiving VA Benefits/Tuition Assistance? Yes No
- Are you an international student here on an F1 Visa? Yes No

EXTENUATING CIRCUMSTANCES: The phrase “Extenuating Circumstances” refers to situations OUTSIDE of your control that affect your overall academic performance and that interfere with your ability to understand policy or meet a deadline. Please attach a typed statement which clearly states:

- Explanation of why you are requesting an exception to University policy;
- Describe your extenuating circumstances; and
- Provide persuasive reason(s) why you should be granted this exception when other students are not.
- Explain why you were unable to meet the published deadline(s).
- What your extenuating circumstance(s) impacted: (all courses in semester indicated or only some courses, etc.
Please note: most extenuating circumstances impact a students’ entire academic load. If only some courses were impacted, explain why.

Attach any and all required supporting documentation. ***KCC will not contact you for documentation.*** If documentation is not attached, the petition will be processed only with the information supplied. Petitions will not be reviewed a second time. Appeals with no supporting documentation will NOT be reviewed. Information provided will be used to render a decision regarding the request.

Please submit completed appeal forms **with** documentation to the Vice Chancellor for Students, 'Ilima 205 at: 4303 Diamond Head Road, Honolulu, HI 96816 or kapvcsa@hawaii.edu

EXIT QUESTIONS:

Do you intend to return to KCC in the following semester? Yes No

If no, do you plan to re-enroll in the future? Yes No

If you do not plan to enroll in the following semester but will return in a future term, you will need to re-apply to KCC. You can submit an online application form at: apply.hawaii.edu.

Please “initial” the appropriate box for the basis of your petition and provide the appropriate documentation.

Approved Circumstances	Required Documentation
<input type="checkbox"/> Recent medical condition (Unanticipated medical condition that occurred during or immediately before the eligible semester)	Dated letter on letterhead from the attending physician specifying the nature of your illness/injury, dates, severity and why you cannot attend school.
<input type="checkbox"/> Immediate family emergency (i.e. death or illness)	Death certificate or obituary notice. <i>Or</i> Dated letter on letterhead from the attending physician <i>containing the</i> dates of occurrence, nature and severity of your relative’s illness/injury.
<input type="checkbox"/> If you transferred to another school	Official enrollment verification on letterhead with university seal from another university containing dates and term attended.
<input type="checkbox"/> Military duty	Copy of official military orders that clearly display the date of call up.

Read these statements carefully:

- All appeals **MUST** be submitted either during the semester in question or **NO** later than 45 days after the semester in question.
- I understand that once an account has gone to collections, an appeal will no longer be considered.
- I have attached all the documentation that I would like to be reviewed. I assume all responsibility for the enrollment changes that may occur.
- I understand that by submitting this Appeal I may owe money back to Kapi’olani Community College for my tuition/fees. If I received financial aid or VA benefits, I have spoken with a Financial Aid representative and or the VA Counselor and understand the ramifications associated with withdrawing from the term.
- Once this Appeal is submitted, the process is irreversible. If my Appeal is denied, my original registration will remain for the class(es) I am appealing and I am responsible for any financial obligations and course grades received.
- When a decision is made, the VCSA office will notify you via your hawaii.edu email address. Please do **NOT** call us regarding the status of your appeal.
- I understand that this is a “one-time only” exception to the policy.
- I understand that once a decision is made, it is final.

*If your situation is not in the list of “approved circumstances”, you may still submit an appeal but there are no guarantees for approval.

By signing below, I indicate that I understand each item above and I am certifying that the information I am providing is true. Misrepresentation of the facts or documentation may be sufficient cause for automatic denial of this appeal and may be in violation of the Student Conduct Code.

Student Signature: _____ Date: _____