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  ____________________________
__________________________  ____________________________
Phone Number                  UH E-Mail  @hawaii.edu

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      (If you need to be withdrawn from any classes, please attach the Add/Drop form with the class(es) you need to drop to this appeal.)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

**EX濡tatua UUucca CH Cn Sflict Pucases:** 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.

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