PENSACOLA STATE COLLEGE PETITION STUDENT ACADEMIC APPEALS COMMITTEE

Please print or type the requested information. Remember: What you write/type will be reviewed by the members of a Committee making the decision on your request.

Student ID Number* *do not use your SSN	Last Name	First		MI	
Address		City	State	Zip	
Primary Telephone	Secondary Telephone	email	email (Pirate Mail or other)		
LATE WITHDRAWAL:	<u>If</u> you are requesting to withdraw from a class after the established withdrawal deadline, you must provide documentation of the mitigating circumstance that prevented you from processing the official withdrawal by the deadline date or the extenuating circumstances that makes continued attendance in <u>ALL</u> classes impossible. List the class(es) and term for which the late withdrawal is requested:				
additional paper or the reany late withdrawal reque	EST and provide JUSTIFICATI everse side of this form if more sts (see above). Requests for want your request must be clearly s	space is needed. I	Documentation is a plicies and procedu	required for	
Date	Student Signature				
Date	Student Signature				
	J				
Advisor review of your reqreview.	uest is required. Please meet w				
	J	th an advisor on ar	ny campus or cente		

Submit the petition (including the advisor review/signature) and any documentation to the Registrar's Office. Your request will be forwarded to the Student Academic Appeals Committee.