

PETITION FOR LATE WITHDRAWAL

Enrollment Services



TIDEWATER
COMMUNITY COLLEGE
From here, go anywhere.™

This form is used by students seeking to withdraw from individual courses **past the withdrawal deadline** posted on the Academic Calendar. Students using financial assistance (military benefits, financial aid, scholarships, etc.) should contact the appropriate office to discuss the impact before submitting this form for review.

Student Name: _____ **TCC ID #:** _____

Course: _____
Class No. Subject Catalog No. Class Section

Sem/Term: ___ Fall ___ Spring ___ Summer **Year:** _____ **Last Date of Attendance:** _____

Reason for Withdrawal (please check one):

___ Financial ___ Health/Medical ___ Military ___ Natural Disaster
___ Relocating ___ Visa Issues ___ Other: _____

Explain your reason in detail (attach supporting documentation/information as necessary/helpful):

Student Signature: _____ **Date:** _____

FACULTY: ___ Approved ___ Denied Reason: _____

Signature: _____ Print Name: _____ Date: _____

ACAD DEAN: ___ Approved ___ Denied Reason: _____

Signature: _____ Print Name: _____ Date: _____

PROVOST: ___ Approved ___ Denied Reason: _____

Signature: _____ Print Name: _____ Date: _____

(required if past end of semester of course)

Submit this completed form to the Enrollment Services Office on the campus of the course.

Processed By: _____ Print Name: _____ Date: _____

Verified By: _____ Print Name: _____ Date: _____

DISTRIBUTION: Enrollment Services / Faculty Member / Academic Dean