



Petition for Exception to Stated Academic Policies Form

STUDENT INFORMATION	
Last Name:	First Name:
GWID:	GW Email:
CCAS Major:	Alternate Email:
Degree Type (BA/BS):	Semester of Request:

INSTRUCTIONS:

1. Please out this form *completely* **and** attach a personal statement *clearly* describing what remedy you are seeking from the College.
2. If applicable, provide copies of substantiating documents (i.e. faculty memo, medical documentation, etc.). Verifiable supporting documentation is required and will be reviewed with your exception request. It is your responsibility to provide adequate documentation that corroborates your statement. Documentation does not solely determine the outcome of your request, however, missing or incomplete documentation may result in a longer processing time.
3. Return completed form and any supporting documentation to the front desk of Phillips Hall, Suite 107. If you have questions, call (202) 994-6211.

GENERAL GUIDELINES:

- Students should not assume that policy exception requests will be approved. Until a student receives written confirmation that an exception has been approved, the student should operate under the assumption that it will be denied (i.e., the student should continue to attend class, submit assignments, consider alternatives, etc.).
- Policy exception requests take approximately five to ten business days to process. Requests that require consultation with other offices (e.g., Student Accounts, The Office of the Registrar, etc.) may take longer. Students are notified of policy exception decisions via e-mail.
- Requests involving the death of a family member must be accompanied by an obituary notice or funeral program.
- Requests involving mental health must have the support of [Colonial Health Mental Health Services \(MHS\)](#) or a private, licensed clinician. [Support of MHS](#) or a private, licensed clinician will be considered, but it does not solely determine the outcome of the request.
- Requests involving physical health must be accompanied by documentation from a medical professional. Again, although such documentation will be considered, it does not solely determine the outcome of the request.

THE FOLLOWING EXCEPTION REQUESTS WILL NOT BE CONSIDERED:

- Requests to graduate with less than 120 hours, less than 60 credits completed at GW (residency requirement), or less than a cumulative GPA of 2.0.
- Requests for substitutions in the major. These requests must be submitted to the faculty advisor in your major department and generally do not require the Dean's approval.
- Requests involving [UW1020](#) and [WID courses](#). The requests must be submitted to the University Writing Program.

REQUEST TYPE (check all that apply)			
<input type="checkbox"/> Post-matriculation Transfer Credit (over 3 courses/12 credit hours max - e.g., ongoing medical treatment or employment requiring taking classes outside DMV - documentation required)	<input type="checkbox"/> Tuition Refund	<input type="checkbox"/> GPAC Requirement (an administrative/faculty error led to student taking a non- GPAC approved course - documentation required)	<input type="checkbox"/> Dual Enrollment
<input type="checkbox"/> Add a Credit Hour after 10 th week deadline (requests will <u>not</u> be considered after the final examination period begins)	<input type="checkbox"/> Count "Not Counted" Course towards 120 requirement (Duplicate credits)	<input type="checkbox"/> Exceeding Academic Probation credit limit (more than 13 credits)	<input type="checkbox"/> First-Year Academic Forgiveness Policy
<input type="checkbox"/> Drop from course(s) after the deadline	<input type="checkbox"/> Readmitted student - GCRs	<input type="checkbox"/> Course Overload Request (if stated requirements are not met)	<input type="checkbox"/> LOA/CE extension
<input type="checkbox"/> OTHER:			

I certify that all information I have provided or submitted in support of my petition is truthful, correct, and complete. I understand that the submission of false, incorrect, or incomplete information or documentation is prohibited and will be grounds for cancelling or withdrawing the exception request.

Student Signature: _____ Date: _____

Action Taken: Approved Partially Approved Denied

Dean's Signature: _____ Date: _____