Enrollment Exception Form

OneStop Student Services, 253 University Hall CPO #1380, UNC Asheville, One University Heights, Asheville NC 28804

Full Name: _____ **UNC Asheville ID#: 930**_____

UNC Asheville Email: _____**@unca.edu** **Phone:** _____

Have you requested exceptions to academic policies in the past? _____ ***If yes, what kind of exceptions have you requested?***

_____

LIST THE COURSES FOR WHICH YOU ARE REQUESTING AN EXCEPTION:

Semester/Year	*Department*	*Course Number*	*Instructor*	*Late Add*	*Late Withdrawal*	*Other*	*Office Use*
				☐	☐	☐	☐
				☐	☐	☐	☐
				☐	☐	☐	☐
				☐	☐	☐	☐
				☐	☐	☐	☐
				☐	☐	☐	☐

☐ **This request affects all courses in the _____ 20 ____ semester**

Complete the following instructions as appropriate for your exception request.

In all cases, appropriate documentation is required and students with health emergencies must have the ***Medical Statement form*** *submitted by a health professional providing treatment. It is your responsibility to make sure the health care provider completes and returns the Medical Statement Form to OneStop. The form is available online at http://www.unca.edu/advising/forms.html.* ***Students should continue to attend classes and complete assignments until they are notified of the decision. Forms should be turned in prior to the last two weeks of the semester.***

- ## *ALL REQUESTS*

Include the following information on a separate sheet of paper and attach to this form:

1. *Give a complete explanation of your request for this exception.*
2. *Provide a plan outlining the steps you will take to avoid future exception requests.*
3. *Attach documentation that supports your request.* ***Petitions submitted without documentation may not be reviewed.***

- ## *LATE ADD*

The following signatures must be obtained before this petition will be reviewed:
Instructor's Signature _____ Date _____

****This student has been attending class regularly (please circle): YES / NO***
Department Chair's Signature _____ Date _____

- ## *LATE WITHDRAWAL*

Examples of Situations that *may* merit a Late Withdrawal
Hospitalization and/or serious health problems
Death in the immediate family

Examples of Situations that *do not* merit a Late Withdrawal
Academic difficulties or becoming "overwhelmed"
Chronic health problems and/or minor illnesses

If you are not requesting a Late Withdrawal from all courses, you must explain why your emergency situation affects only some of your courses on a separate sheet of paper with the other information requested above.

Note: *The following signatures are needed if you are on Financial Aid and/or live on campus.*

_____ _____
Dean of Students *Financial Aid Representative*

Students with emergencies at the end of the semester should, if they are passing the course, request an Incomplete from the instructor.

- ## *OTHER REQUESTS*

Provide a complete description of your situation, the enrollment policy affected, and what exception you are requesting.

I hereby declare all statements and attachments submitted contain true and accurate information.

Student Signature _____ ***Date*** _____

Name (printed) _____

You will be informed of the approval or denial of your request by email. Emails regarding this appeal will only be sent to UNC Asheville email accounts.

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Committee Comments:

Received in OneStop by _____ Date _____ Complete (Y/N) _____ Needs: _____

_____

Decision: Approved _____ Denied _____ Date _____ Initials _____

Changes Processed (if approved) by _____ Date _____ Student Notified by _____ Date _____