

University Registrar

ATTACH payment receipt

FRESN@STATE. Record Adjustment Petition: **Retroactive Withdrawal**

The Record Adjustment Petition: Retroactive withdrawal is used when a student is seeking to retroactively withdraw after the deadline for the term.

A separate petition must be completed for each term if requesting multiple. Petitions are reviewed by the Record Adjustment Committee and you will be informed of the petition decision by Fresno State email. Submitting a petition is NOT a guarantee that it will be granted.

PETITION FEE AND INSTRUCTIONS: \$10 per petition (non-refundable)

- Payment MUST be made prior to submitting your petition.
- Click here to pay: https://commerce.cashnet.com/fresnoem_universityregistrar

release nanerwork is not appropriate documentation

Student ID#: Date: ____ Last Name: First Name: MI: Did you receive Veterans Affairs benefits this semester? \square Yes \square No **Retroactive Withdrawal Request** Please initial that you have read the information stated below: Preferred Period: Submit petition no later than the fourth week of the semester that immediately follows the term in which you took the class you are petitioning. **Extension Period**: If the deadline above is not met, the extension period is as follows: If you have not graduated from Fresno State: Submit Petition no later than 6 years from the semester being petitioned. If you have graduated from Fresno State: No changes can be made to your record once a degree has been posted. After the extension period, petitions submitted after the extension period are very unlikely to be granted. Provide a statement describing circumstances that occurred during that time that were extremely, extraordinary

and clearly beyond your control. Explain why you did not withdraw from the semester, how your circumstances prevented you from successfully completing the semester, and what has changed. Note: lack of motivation, poor

Strong supporting documentation (e.g. letter from doctor on letterhead outlining dates & issues, death certifi cate, police report, etc.) must be attached in order to be considered for approval. Bills, medication reports or

time management, increased work hours, academic overload, etc. are not acceptable reasons.

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Example: Semester/Year: Fall 2017	☐ I am requesting retroactive withdrawal from all courses in the indicated
Taken: Semester/Year: —	Lerm.
Example: Dept./Course Number: ENGL 205	Example: Section Number: 12345
Dept./Course Number:	Section Number:

The standard time periods to officially withdraw from classes are as follows:

- 1. Student can drop classes online via Student Center prior to the first day of instruction.
- 2. Drops done online via Student Center. No form or permission needed for the first 19 days of instruction.
- 3. Starting on the 20th day of instruction, drops require a serious & compelling reason. Completed Drop/Withdraw-al form and required signatures. Approved drops will receive "W" on student transcript.
- 4. During the last 3 weeks of instruction, drops only allowed for reason(s) beyond a student's control and require additional approval.

Courses receiving a failing grade are typically considered for retroactive withdrawal. If you received any passing grades in the term you are requesting, you must acknowledge below why your circumstances caused you hardship in only some, but not all of your courses.

Question 2: If you received some passing courses that semester, please explain why you were able to pass some courses but not all. Question 3: Why were you not able to drop during that semester?	
courses but not all.	
Question 3: Why were you not able to drop during that semester?	
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Student Signature: Date:	
For Record Adjustment Committee Use Only	
Date Committee Met: Decision:	
2	
COMMENTS:	
Signature: Date:	
REGISTRAR OFFICE NOTES	
Form received by: Date Entered in Database and Sent to Committee:	—
Processed by: Date:	
Imaged by: Date:	
□ Documentation was attached, but not scanned for retention. Type of Document:	