

Student Name: _____ Date: _____
Student ID: _____ Term: _____ SU _____ FA _____ WI _____ SP
Address: _____ Title of Class: _____
City, State, Zip: _____ Course # _____ Section: _____
Phone: (____) _____ Instructor's Name: _____
Email Address: _____

PLEASE READ AND SIGN (Form must be completed within 30 days of the quarter involved)

This petition is for students who have experienced **extreme and/or unusual hardship** beyond their control which have impacted their academic status or enrollment at TVCC. This petition and supporting documentation must be submitted to the committee within 30 days of the quarter involved. A petition may only be submitted once in a student's career at TVCC.

This form **may not** be used to petition for grade changes (e.g. an "F" to a "W"). Any request to modify grades must be made directly to the instructor who awarded the grade.

On the reverse side of this form, please describe your situation in detail. You may attach any additional documentation if needed. Place this petition in a sealed envelope and deliver to the Student Services Center, located in the rear of the Four Rivers Cultural Center building OR mail to the *Vice President of Student Services, Treasure Valley Community College, 650 College Blvd., Ontario, OR, 97914.*

After the committee reviews your petition you will receive a letter with their decision. All decisions are final. I have read and agree to the above terms and conditions.

Student Signature

This section is to be completed by the petition committee

Date Petition Received: _____

Appeal Decision: _____ Approved _____ Denied _____ Incomplete

Comments/Action _____

Notepad

Letter Sent

Vice President of Student Services signature: _____

Date: _____

