Recd By/Date:	
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## **GENERAL PETITION**

## **Evergreen Valley College Admissions and Records Office**

Student's First and Last Name	Stude	nt ID	
Date of Birth	E-mai	l Address	
Semester/Year Petitioned	Phone	e Number	
*Please note that general petitions submitted without be processed. Select One:	proper documentation	on will be consider	red incomplete and will no
<ol> <li>No-Show Drop after the Deadline: If you we you must obtain an official e-mail from your instrudate, and forward it to the Dean of Enrollment Serve Request Form</li> <li>Excused Withdrawal: Submit documentation accordance to Title V, 55024(e). Attach documenta</li> </ol>	ctor certifying that you vices. If this request is ap	stopped attending the proved you are eligibet to drop due to reasons	ir class prior to the census ble to complete the Refund s beyond your control in
hospital, physician, law enforcement agency, attorn			
	• (Petitioned Classes (I.E., SOC 010-201)		
3. <b>Drop after the "W" Deadline:</b> Submit docume you from dropping your class(es) on or before the dwafter the deadline.			
•	(Petitioned Class	sses (I.E., SOC 010-2	201)
<b>Note:</b> The Admissions and Records office does not chan Administrative Policy 4231; Education Code Sections 7622 corrections must be initiated within three (3) years after the g	24, 76232 and Title 5 S	ection 55025, all gra	ides posted are final and any
Please state the primary reason for your General Petition The general petition process requires the student to outline the evidence IE: (letters from the hospital, physician, law enforce required to explain your request, please continue on the back initial review of the petition will occur within 7-10 business	neir request in writing ar ement agency, attorney, k. The general petition is	death certificate, etc.	). If additional space is
Student Signature			Date
	TMENT USE ONLY		
Action:  Dean of Enrollment Services:  Remarks:		Approved:	Denied:
Processed and informed student By/Date:			

Rev. EVC 6/15/21