Special Withdrawal Petition

A special Withdrawal Petition is submitted at the **last** day to withdraw from the course. Your request with only be considered if the circumstances were non-recurring, catastrophic, or life threatening in nature, and beyond your control. The following are examples of acceptable events: medical, military duty, jury duty, death of an immediate family member, family care, employment schedule changes or college error. No more than 2 petitions in a 24 month period will be considered for a student.



Deadline: A Special Withdrawal Petition must be submitted by the **last** day of semester following the semester in which the course(s) being petitioned.

Grades: If your request is approved, any grade change(s) will result in the issuance of a grade of "WD".

Notification: You will be notified by email when a decision is made. Email will be sent to your Omail account.

Financial Aid Recipients – Approved requests could cause repayment of federal student aid received. If you are a financial aid (FA) recipient, you are strongly encouraged to consult with an Oserve Advocate before completing this request.

OCID:	
Printed Name:	
Phone Number:	
Checklist:	
	I have attached a signed statement containing my name, address, semester being petitioned, requested courses and an outline of my extenuating circumstance including why consideration should be given to my request.
	I have attached documentation supporting my extenuating circumstance. Examples include medical documentation from a licensed professional submitted on letterhead, copy of orders for active duty, copy of obituary or death certificate, letter from care facility on letterhead, signed letter from employer on company letterhead, documentation from instructor, administrator or advisor for college error.
	I am aware that I am responsible for any adjustments to financial aid, scholarships, loans, etc., that may be affected if my request for special withdrawal is approved.
	I have completed, signed and plan to submit this checklist, along with my signed typewritten statement and supporting documentation.
Will you be requesting an appeal of tuition/fees? ☐ YES ☐ NO	
	If yes, you will receive a form to complete only if your Special Withdrawal Petition is approved.
*Incomplete petitions missing checklist items with not be considered.	
Please submit completed petitions to Oserve or by mailing or faxing to the Records Office. Records Office Oserve Office P.O. Box 10,000 Phone (567) 661-7378 Toledo, OH 43699 Toledo location: Student Service Center, College Hall Fax (567) 661-2101 Findlay location: EC 112 Email: special_withdrawal@owens.edu	
Statement of Acknowledgement: I hereby certify that the information provided is correct and true to the best of my knowledge. I understand that submitting fraudulent information or failure to follow specified instructions may interfere with my request and may subject me to federal and/or state penalties. I further understand that any misrepresentation of information may subject me to administrative action in accordance to the Student Code of Conduct. I hereby authorize the Records Office or appointed representative reviewing my petition access to all documentation pertaining to my request.	
Stude	ent Signature: Date:
Phone Number	