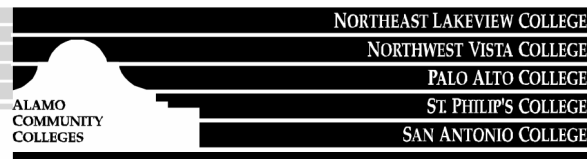


# Exception Application-SB 1231-Six Drop Rule



Please complete form and provide appropriate documentation. Please print clearly.

Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_ Date: \_\_\_\_\_

Current Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_  
Zip Code \_\_\_\_\_ E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

Semester for which the course(s) in question were taken: \_\_\_\_\_

If this request pertains to the current term, have you already dropped the class(es): ☐ Yes ☐ No

**Please list the course(s) for which you are requesting a designated "Exception" to the 6-drop rule.**

Course Name	Number	Section
Course Name	Number	Section
Course Name	Number	Section
Course Name	Number	Section

**I am requesting an "Exception" designation of this drop/withdrawal for the following reason:**

- \_\_\_ 1. Severe illness/debilitating condition. [e.g., Letter from physician or copy of medical records]  
\_\_\_ 2. Care for sick, injured or needy person. [e.g., Letter from attending physician]  
\_\_\_ 3. Death of family member or other person with close relationship to student. [e.g., Copy of Death Certificate or Obituary]  
\_\_\_ 4. Active military duty for student, family member or close relationship to student. [e.g., Military Orders]  
\_\_\_ 5. Work schedule change. [e.g., Letter from employer on official letterhead]  
\_\_\_ 6. Other good cause. [e.g., Provide written statement below and appropriate documentation]

If you need additional space, please use other side.

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I attest that the information I am providing is true and accurate. I am responsible for all academic and/or financial responsibilities if the information I have provided is found to be untrue or inaccurate.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## OFFICIAL USE ONLY

Documentation Verified ☐ Yes ☐ No If No, Please Explain: \_\_\_\_\_

Decision on Request: ☐ Approved ☐ Not Approved

By: \_\_\_\_\_  
Printed Name/Title \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Method Student was notified: ☐ Phone ☐ E-Mail ☐ In Person Date \_\_\_\_\_ A&R Initials \_\_\_\_\_