

FVTC Priority Appointment Program Withdrawal Appeal

Student ID: _____ Name: _____ Phone: _____

Address: _____ Email: _____

Program: _____

FVTC will consider appeals in extenuating circumstances (situations outside of the student's control) and decisions will be made at FVTC's discretion. **Please view the back side of this form for examples of extenuating circumstances.**

Please note:

- ✓ Appeals must be submitted no later than **twenty (20) calendar days** after the priority enrollment appointment date. An appeal made after the 20 day grace period will not be accepted.
- ✓ If approved, you will be allowed to stay in the program with your original admit term. However, your priority enrollment appointment date has been forfeited for this term and enrollment into classes will only be available by monitoring the classes yourself for openings.

The following items are required to appeal.

Written Personal Statement (Describe your extenuating circumstances) _____

Additional Documentation

- See the back side of this form for the acceptable types of documentation

Student Signature: _____ Date: _____

Please mail appeal form and any supporting documentation to FVTC, Attn: Enrollment Services, 1825 N. Bluemound Dr; Appleton, WI 54914.

Appeals are reviewed within 20 calendar days of receipt of all required documentation. The results of your appeal will be delivered by either phone or email.

For Office Use Only

Date Rcvd _____	Approved or Denied	Staff User ID _____	Notes:
Staff User ID _____	Date Completed _____	Emailed or Called Back	

FVTC Priority Appointment Program Withdrawal Appeal Documentation

Circumstance		Examples of Documentation
Medical Condition (Any letter(s) should state the nature of your illness/injury, the date(s) of the occurrence, and that you are able to return to school)	Serious illness or change in health status	*Record of doctor visits *Letter from doctor
	Surgery/Hospitalization	*Record of doctor visits *Letter from doctor *Hospitalization records *Copies of medical bills documenting illness/injury
	Dental Emergency	*Record of dental visits *Letter from dentist
Student's Children	Child's Medical Condition	*Record of doctor visits *Hospitalization records *Letter from child's doctor
Additional Circumstances	Death of a Loved One	*Obituary *Funeral program *Copy of Death Certificate *Letter from licensed counselor *Documentation should include date and indicate relationship to the deceased
	Assault/Domestic Abuse	*Police Report *Court documentation *Letter from clergy, social worker, counselor, doctor
Military Leave	Mandatory Training	*Copy of your orders
	Call to Active Duty	*Copy of your orders

Please note that the following items are NOT considered extenuating circumstances;

- Work Related (Required overtime, schedule change, loss of job)
- Financial Aid (Delay or denial of Financial Aid)
- Vacation or Travel
- Incarceration
- Missed or unread emails (using default email other than FVTC, not monitoring Spam folder)
- Inability to register due to FVTC hold (past due balance, financial hold, disciplinary hold)
- All other items not listed that are within the student's control