

PETITION TO APPEAL THE
ADD/DROP DATE DEADLINE

NAME _____
 ADDRESS _____
 URI ID # _____ PHONE # _____
 E-MAIL _____
 COLLEGE _____
 MAJOR _____ SEMESTER _____

University of Rhode Island
 Enrollment Services Green Hall
 6 Rhody Ram Way
 Kingston, RI 02881 USA

Fax Completed Form To:
 (401) 874-2910

Phone: (401) 874-9500
Website: www.uri.edu/es

ACTION	COURSE	SECTION	CREDIT	TITLE / INSTRUCTOR
ADD*				
DROP				
CREDIT CHANGE*+				

*BURSAR CLEARANCE REQUIRED + To change credits in a variable credit course, enter the new credit count in the CREDIT column.

INSTRUCTIONS FOR STUDENT

Late adds or drops are approved only for unusual, extenuating circumstances. Full documentation supporting these circumstances must be provided. If you believe that a late add or drop is justified, complete this petition as follows:

1. Complete all pertinent information above these instructions.
2. On a separate sheet of paper, state the reasons you believe you qualify for the late transaction(s) requested above. Your name and URI ID number should be included on the sheet.
3. Attach documentation supporting your claim of extenuating circumstances (e.g., a medical report is expected in case of significant illness.) Failure in a class, or lack of attendance does not itself, constitute extenuation circumstances.
4. Have your course instructor(s) complete the instructor portion of the petition below. For Online Courses, you may submit an email from the instructor specifying the last date you attended class and indicating permission to drop. Online Course instructors may also submit this email directly to your academic dean.
5. Submit this completed petition, your statement, and supporting documentation to your dean's office representing your school or college (e.g., UC, A&S, BUS, CCE etc...) Submitting this petition does not assure that it will be approved, so be sure to continue attending the affected course(s) while your petition is being evaluated.
6. If your College requires, the week following the submission of this petition, return to the dean's office to learn the results of your petition. If approved, continue with the remaining two steps.
7. If approved, you will be given this petition to take to the Office of Enrollment Services.
8. Failure to present this petition to the Office of Enrollment Services within ten days of approval will require that it be resubmitted for approval to your academic dean.

Student's Signature _____ Date _____

TO BE COMPLETED BY COURSE INSTRUCTORS (Additional comments may be added on back of original copy)

Course	Sctn.	Instructor	Instructor Signature	Date Student Last Attended	Instructor(s). Do you support this petition (Circle)	
					Yes No	Comment
					Yes No	Comment
					Yes No	Comment

TO BE COMPLETED BY STUDENT'S (Assistant/ Associate) ACADEMIC DEAN

Approved Disapproved Returned

Dean's Signature _____ Date _____

BILLING AND COLLECTIONS CLEARANCE

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