



Cañada College  
Office of Admissions and Records

OFFICE USE ONLY  
Date Rec'd: \_\_\_\_\_  
Initials: \_\_\_\_\_

PETITION FOR EXTENUATING CIRCUMSTANCES

Name: \_\_\_\_\_ Student ID# \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Phone Number (S): \_\_\_\_\_

Petition for: Fall  Spring  Summer  Year \_\_\_\_\_

This petition is a formal request for an exception to or waiver of college procedures. Extenuating circumstances are verified cases of illness, accident, or other circumstances beyond your control. State your extenuating circumstances in as much as detail and as clearly as possible. **Evidence to support your request is required.**

**Petitions with insufficient information, explanation or documentation will be denied.**

**DIRECTIONS:**

- Check the appropriate box below and attach a written statement and supporting documentation that explains your extenuating circumstances.
  - Verified case of serious illness
  - Accident
  - Other emergency situation beyond your control \_\_\_\_\_
- Return completed form with supporting documentation (For example: doctor's note, death certificate, accident report, etc.) to the Office of Admissions and Records, Bldg. 9, Room #121.

Student signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR OFFICE USE ONLY**

Petition Approved \_\_\_\_\_ Petition Denied \_\_\_\_\_

COMMENTS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Extenuating Circumstances Committee: \_\_\_\_\_ Date: \_\_\_\_\_