Petition for Exception to Policy

<u>Please fill out this form and email it to info@birthingway.edu. Your petition must be submitted within 30 calendar days following the occurrence of the circumstance.</u>

If you have questions, or if you do not receive confirmation that your Petition was received within 10 business days, please contact Birthingway by sending an email to info@birthingway.edu. It may take up to 45 days to process a petition.

It is important to fill this form out as completely as possible. Attach additional pages if necessary. Your petition will be evaluated according to the following criteria.

Evaluation Criteria			
Was the circumstance outside the student's control? (car accident, death in family, etc.)			
Was the student able to anticipate it happening?			
Is this the first time the student has requested this exception?			
Has the student demonstrated conscientious communication and/or follow-through regarding this circumstance?			
What, if anything, has the student already done to mitigate the situation?			
Is the proposed resolution reasonable?			
Does the proposed resolution require an unreasonable expense/time burden for the college?			
Office Use Only: Is this the first	time the student	has requested an exception to this policy? Yes / No	
Student:			
Legal First Name	Legal Middle Initial	Legal Last Name	
Date: Enrolled Program:Term: Course Number (if applicable): CourseName			
Teacher (if applicable): What policy are you requesting an located. (e.g. Attendance Policy, Grading	exception for? I		
How did you deviate from this poli	cy?		

Why did you deviate from this policy?
Please attach any documentation related to this situation (e.g. correspondence with instructor, statement from preceptor, medical care provider's note, etc.). List what you have attached. The more documentation you provide initially the more quickly and efficiently we can respond to your petition.
What is your proposed resolution. Please include a clearly dated time frame for completion, if applicable. (Please note that you may be required to pay for any expense incurred as a result of your resolution. Examples include the cost of materials, models, the additional instructor time, etc.)
Student Signature Date
Please email this completed form to info@birthingway.edu
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Received Date/Time/Initials