



For office use only:  
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**EXCESSIVE WITHDRAW PETITION**  
San Joaquin Delta College

\_\_\_\_\_ **98-** \_\_\_\_\_ **@students.deltacollege.edu**  
Last Name First Name Delta ID # Phone No. Delta Student Email

\_\_\_\_\_ Dept & No. of Course Repetition Request Term & Year

**Please read the following before completing this petition:**

Course Registration, Adds, and Drops (AP 5075, Reference Title 5, 55024)

A student may withdraw from a class and receive a “W” for the same course only three times. No student will be permitted to withdraw and receive a “W” in a class more than three times. By filing a petition requesting permission to enroll, a student may be permitted to enroll in a class after having received the maximum authorized number of “W” symbols as long as the student will receive a grade or non-evaluative symbol other than a “W” upon completion of the course unless:

- The student withdraws from the class prior to the end of the fourth week of instruction or 30% of the term, whichever is shorter; or
- The Director of Admissions and Records approves such a withdrawal after a review of a petition submitted by the student which shows the withdrawal is justified because of documented extenuating circumstances.

I am requesting permission to enroll in the above listed course for the following reason (Please indicate with a check mark which one applies):

- The course must be repeated to fulfill a requirement for a degree, certificate or transfer (Documentation is required- i.e. application for Degree or Certificate, Evaluation, Successful Course Completion Plan).
- No other course is available to fulfill a requirement for a degree, certificate or transfer (Documentation is required- i.e. application for Degree or Certificate, Evaluation, Successful Course Completion Plan).
- Other \_\_\_\_\_

**Before submission of this petition you must complete page 2 “Successful Course Completion Plan” with a counselor.**

Student’s Signature \_\_\_\_\_ Date \_\_\_\_\_

## SUCCESSFUL COURSE COMPLETION PLAN

**Last Name:** \_\_\_\_\_ **First Name:** \_\_\_\_\_ **Delta ID # 98-** \_\_\_\_\_

I am recommending the following to ensure that the above student's requested course repetition for \_\_\_\_\_ will be successfully completed:  
Dept. & No. of course repetition requested

- Enroll in no more than \_\_\_\_ units.
- Contact the appropriate Learning Center for subject tutoring:
  - Reading, Writing & Learning Center
  - Math & Science Learning Center
  - Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Counselor's Signature \_\_\_\_\_ Date \_\_\_\_\_

Counselor's Printed Name \_\_\_\_\_

I have discussed the **Successful Course Completion Plan** with my counselor and agree to follow the recommendation given regarding this petition. (sign below)

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

**ACTION TAKEN:**

**Granted:** Your petition requesting permission to repeat a course after two or more attempts has been granted. However, there are several limitations that apply to this approval:

1. You must request permission from the instructor to add to the course once classes have begun.
2. You must provide your instructor with a copy of this petition to repeat the approved class.
3. You will be allowed to enroll only **AFTER** all other credit seeking students have been added.

**Denied**

**Other** \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

Director of Admissions & Records Signature \_\_\_\_\_ Date \_\_\_\_\_

**NOTICE TO THE INSTRUCTOR OF THE PETITION COURSE: An Instructor Add Memorandum must be completed and submitted to the Admissions & Records Office if you are allowing this student to enroll.**

**PLEASE NOTE: THIS STUDENT IS REQUIRED TO RECEIVE A GRADE AND MAY NOT DROP OR BE DROPPED FROM THIS COURSE.**