**PENN STATE BERKS**

**FACULTY SENATE PETITION CHECKSHEET**

***DIRECTIONS:***

*1.* ***Prior to requesting a retroactive withdrawal, you must consider the financial consequences and complete Step 1 below before submitting your petition. (Refer to the following website: studentaid.psu.edu/eligibility/satisfactory-academic-progress).***

*2. Complete all of the Required Items (1-5) as well as any appropriate Additional Documentation (6-8).*

*3. When completed, please contact Maria Moceri, Student Records Coordinator, 125 Franco / 610-396-6087 / mqm1@psu.edu.*

***Do not send any materials directly to University Park****. The Senate Committee will notify you of its decision via letter within 4-6 weeks. If financial aid is involved, then the process will take approximately 7-9 weeks.*

4. Additional information regarding the Faculty Senate Petition process may be found at the following website: <http://handbook.psu.edu/content/petitions> If you have any further questions, then please contact Maria Moceri (mqm1@psu.edu).

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# **REQUIRED ITEMS**

\_\_\_ 1. **READ AND COMPLETE STUDENT AID REVIEW FORM**

The Student Aid Review for Retroactive Withdrawal form may be found at the Berks Registrar’s Office in 125 Franco or on the Student Aid website: <http://studentaid.psu.edu/eligibility/retroactive-withdrawal-form> **Mail or fax the completed form to the Office of Student Aid at University Park.** Upon review of your form by the Office of Student Aid, an appointment will be arranged for you to learn about the financial consequences of your petition. Following the meeting, the back of the form will be completed by the Office of Student Aid and returned to you for submission with your petition. **Your petition for a retroactive withdrawal *cannot* be submitted without the completed, signed form by the Office of Student Aid at University Park.**

\_\_\_ 2. **STUDENT LETTER**

Compose a letter addressed to the Senate Committee on Undergraduate Education. **This is a formal letter that must contain the following: date, your current mailing address, your name, your PSU ID, and your signature**. Your letter should be typed, clear, factual, logical, and brief. In the first paragraph, begin by stating your name, PSU ID, and your request (e.g., retroactive withdrawal, retroactive late-drop, etc.). In the body of your letter, provide a narrative describing the circumstances surrounding your request and explain why you did not or could not follow the appropriate University policy and/or procedure. In the final paragraph, explain how you have resolved the problem and refer to the supporting materials you are enclosing. Be sure to check your grammar, spelling, and word usage.

\_\_\_ 3. **ADVISING TRANSCRIPT**

Provided by the Berks Registrar’s Office in 125 Franco.

\_\_\_ 4. **APPROPRIATE FORM** (Complete the appropriate form with signatures.)

a. Schedule Adjustment form b. Official Withdrawal form c. Other Form: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_ 5. **SUPPORTING DOCUMENTATION FROM COURSE INSTRUCTOR(S)**

**If the petition involves a retroactive late-drop from a course, a retroactive withdrawal from a semester, or changing a course grade after one calendar year**, a letter from the course instructor(s) must be provided describing the circumstances surrounding your request. The letter should indicate how the course instructor(s) is (are) involved, date of last attendance, and whether or not the course instructor(s) support(s) your request. An email from the instructor may be substituted; however, **the instructor must send the original to the student and a copy to Maria Moceri** **mqm1@psu.edu****.**

**If the petition involves “administrative and/or clerical errors”**, then it must be shown that the University has committed an administrative error or that faculty and/or advisors have committed errors in applying University regulations, policies and/or procedures.

# **ADDITIONAL DOCUMENTATION**

\_\_\_ 6. **SUPPORTING DOCUMENTATION FROM MEDICAL PERSONNEL**

If the petition involves illness, medical disorders, etc., then provide appropriate documentation from the attending physician. This documentation must be on letterhead, dated, signed, and **must** **match the timeframe of the request**. This documentation must provide sufficient information for the Senate Committee to decide whether you were capable of attending class, completing assignments, and following University policies and/or procedures.

\_\_\_ 7. **SUPPORTING DOCUMENTATION FROM FACULTY/ACADEMIC ADVISOR**

An email may be sent to Maria Moceri (mqm1@psu.edu). This email should indicate how the faculty/academic advisor is involved and whether or not the advisor supports your request.

\_\_\_ 8. **SUPPORTING DOCUMENTATION FROM ADDITIONAL SOURCE(S)**

An email may be sent to Maria Moceri (mqm1@psu.edu). This email should indicate how the additional source(s) is (are) involved and whether or not the additional source(s) support(s) your request.

MQM1/MCS121: 05/2016