

PETITION FOR SPECIAL CONSIDERATION

The Faculty of Humanities has the responsibility to ensure that degree, program, and course requirements are met in a manner that is equitable to all students. While the Faculty adheres strictly to all deadlines and academic regulations as stated in the University Calendar, it does wish to assist students with legitimate difficulties. Students who seek special consideration or who wish to request that the application of a particular University or Faculty regulation be waived because of compelling medical, personal or family reasons, may submit a Petition for Special Consideration to the Office of the Associate Dean. Supporting documentation will be required but will not ensure approval of the petition. The authority to grant petitions lies with the Faculty Associate Dean's office and is discretionary. Following receipt of the appropriate documentation and forms, the Assistant Dean shall submit the petition to the appropriate individual or committee and shall secure a final decision from the individual or committee. The student will be notified in writing (by email) of the decision on his/her petition.

Petitions for Special Consideration decisions are final. In accordance with the Student Appeals Procedures, decisions made on Petitions for Special Consideration cannot be appealed to the Senate Board for Student Appeals. If a student feels his/her human rights have been violated, they may contact the Equity and Inclusion Office.

Students are responsible for submitting Petitions for Special Consideration in a prompt and timely manner for the relevant session, but no later than July 31st immediately following the Fall/Winter session or November 15th immediately following the Spring/Summer session.

Name:	Student #:	
Faculty		
Email:	@mcmaster.ca	
Telephone #:		

What special consideration are you seeking? You must complete and submit the Petition Checklist with your Petition.

Retroactive withdrawal of course(s). A completed INSTRUCTOR STATEMENT FOR CLASS PARTICIPATION form may be required.

Please specify what action you are seeking:

TERM(S) FOR ACTION REQUESTED (e.g. Fall 2017):		
Laws you discussed your situation with anyons in the Foculty?		
Have you discussed your situation with anyone in the Faculty?	☐ YES	□ NO
If YES, please identify:		
Please list all documentation attached to this form:		

The approval of this petition may result in significant OSAP implications. Please contact the Office of the Registrar to inquire about possible changes to your funding.

Student Signature:



№ (905) 525-9140 x 27532
⊕ (905) 524-5791
⊇ humanities@mcmaster.ca
⊕ humanities.mcmaster.ca

Use this space to provide a statement to support your petition for special consideration. You may attach a separate typed sheet, if desired. Provide full course identity and any additional information you believe necessary. If you are citing medical reasons for your request, **medical documentation MUST be attached** at the time that you submit this form for consideration.

The information gathered on this form is collected under the authority of the McMaster University Act, 1976. The information is used for the academic, administrative, financial and statistical purposes of the University including, but not limited to, admissions; registration and maintaining records; awards and scholarships; convocation; provision of student services, including access to information systems; alumni; and disclosure to or on behalf of the applicable McMaster student government. This information is protected and being collected under section 39 (2) and section 42 of the *Freedom of Information and Protection of Privacy Act* of Ontario. Questions regarding the collection or use of this personal information should be directed to the University Registrar, University Hall 209, McMaster University

FOR OFFICE USE ONLY: Date Received:	Comments:
Approved	
Denied Approved by:	Date:



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Petition for Special Consideration Checklist

All pages must include your full name and student number. Your request will only be considered with submission of all required documentation.

Name:

Student #:

INSTRUCTOR STATEMENT(S)

- □ I have provided the relevant Instructor's Statement forms (if applicable) for each course that I wish to have retroactively withdrawn and I have supplied required personal information and full course identity.
- On each Instructor's Statement I have obtained the required information from the instructor, including my grades to date, attendance record (if known), the instructor's dated signature and comments.

Note: Instructor Statement(s) are required and serve as advisory to the Humanities Academic Advising Office only. The final decision will be made by the Faculty office. If you are requesting a late withdrawal, do not discontinue your effort in the course on the assumption that your request will be approved.

WRITTEN STATEMENT

- I have included a detailed but concise statement explaining the exact nature of my request (i.e. retroactive withdrawal from English 1A03 for Fall/Winter 2016-17) and the reasons I believe my request is justified. The statement is signed and dated, and includes:
 - My name, student number
 - □ A chronological explanation of the circumstances that motivated this request.
 - □ If I am requesting retroactive withdrawal of course(s), I have indicated how the circumstances affected my attendance and ability in the course(s) and, if I am seeking selective withdrawal, I have explained why the circumstances did not affect my entire program. Further to this, I have explained why I was not able to drop the course(s) by the University's published deadline. If the request is retroactive (i.e. from a prior session), I have also explained why I have not made this request until now.

DOCUMENTATION

I have included all supporting documentation relevant to my Petition (verification of medical condition, change of employment, travel, legal issues, etc).

UNDERSTANDING

Pertaining to RETROACTIVE WITHDRAWAL of a course

- I understand that requests for late and/or retroactive course withdrawal are approved only in the presence of convincing evidence that a serious and unavoidable hardship arose unexpectedly after the last day for cancelling a course without failure by default.
- □ I understand that if I am granted approval for course cancellation, the course(s) will remain on my record but will appear as cancelled with a "W" notation, which does not influence my cumulative GPA.
- □ I understand that if my request is denied, the course(s) will remain on my record with grade(s) as reported by my instructor.



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Requests are approved only in the presence of convincing evidence that a serious and unavoidable hardship arose unexpectedly after the deadline and, in the case of retroactive withdrawal, the hardship not only affected your performance in the course but it also prevented you from seeking relief during the session. If the course is in progress, do not discontinue class attendance on the assumption that your request will be approved.

To the student: You must submit a completed *Instructor's Statement* form from each instructor whose course you wish to retroactively drop and your own personal statement describing your justification. You must also provide documentation of the hardship that you describe as your justification. Finally, you must include a completed checklist and the completed petition and instructor's statement. Petitions should be submitted in a prompt and timely manner for the relevant session, but no later than July 31 immediately following the Fall/Winter session or November 15 immediately following the Spring/Summer session. You may submit your petition to the Humanities Academic Advising Office.

I verify that the information contained in this petition package is complete and valid, and that I have considered all relevant aspects of cancelling courses after the deadline. I also acknowledge that submitting false or misrepresentative medical certificates or other documentation in support of requests for concessions on academic work or deadlines is considered to be Academic Dishonesty under the University's policy on Academic Integrity, and that offences will be dealt with by following procedures set out in the University's Academic Integrity Policy.

I further acknowledge that I may be subject to additional tuition fees and late registration fees.

Student Signature:

Date: