

Retroactive Academic Action Information

General Information

The following Information can also be found in the SIU Undergraduate Catalog in Chapter 2 "Admissions, Tuition, and Academic Information" (<http://registrar.siu.edu/eval/catalog.htm>)

No tuition or general student fees shall be refunded in cases where withdrawal occurs after the deadline stated in the Board of Trustees policy, except for students in grave circumstances who demonstrate that, for reasons beyond control, they are utterly unable to continue their education programs.

A student must be withdrawn from the University for the semester requesting a refund before the request can be considered.

Tuition and fees will not be refunded for courses that have already been completed earlier in the semester and for which a final grade has been earned.

Only circumstances fitting one of the conditions listed below will be considered for any retroactive changes. Supporting documentation must be provided to the Retroactive Academic Actions Appeals Committee.

In any case, you must complete both pages of the Retroactive Academic Action Petition and submit your supporting documentation to the Office of the Registrar before any consideration will be given.

Criteria for Retroactive Academic Action Requests

1. Accident or illness occurring prior to the withdrawal deadline which incapacitated the student and made it impossible for them to withdraw prior to the deadline
2. Accident or illness in the student's immediate family that occurs prior to the withdrawal deadline and is of such nature as to prevent the student from continuing their education.
3. Emotional or psychological trauma resulting from an incident which occurred prior to the deadline and for which the student is undergoing counseling or therapy.
4. A disciplinary, academic, or financial aid termination appeal that is not accepted if the appeal was initiated prior to the withdrawal deadline.
5. Induction into military service for a period not less than six months.

Documentation Examples

Written verification from a physician as to the accident or illness to the student or in the student's immediate family and the student's inability to withdraw prior to the deadline.

Written verification from a physician or counselor supporting the conditional of emotional or psychological trauma that substantiates the incident occurred prior to the deadline.

Copy of letter denying disciplinary, academic, or financial aid termination appeal with verification the appeal was filed before the deadline.

Written correspondence from the military which verifies when the student is to report for military service and the length of time the student is expected to serve.

Retroactive Academic Action Petition

Mail to:
Student Services Building, Room 0251
1263 Lincoln Drive MC 4701
Carbondale, Illinois 62901

Name _____ Dawg Tag _____

Major _____ Academic College _____ Undergraduate

Mailing Address _____ Graduate

Phone Number _____ Email Address _____

Briefly state the nature of your appeal (must also complete the petition and provide supporting documentation) Please print legibly

Student's Signature _____ Date _____

Semester & Year _____ Credit Hours _____ (Check One) Add

Drop

Course(s) _____

Include: Department, Course Number, & Section Number

Instructor's Comments _____

Instructor Approval Yes No (for individual course adds only) Grade _____

Instructor's Signature _____ Date _____

NOTE: The following steps must be completed before your appeal will be brought to the Retroactive Actions Appeals Committee:

Submit both pages of the retroactive academic action petition and appropriate documentation to Retroactive Academic Actions Appeals Committee, Transitional Programs, Student Services Building, Room 0251, 1263 Lincoln Drive MC 4701, Carbondale, Illinois 62901

It is the student's responsibility to provide appropriate documentation for review (please review the retroactive academic action general information sheet) . If you received financial aid, you must contact the Financial Aid Office and meet with a representative to review the impact of any retroactive action on your financial aid. This form must be completed by the Financial Aid representative before review by the Registrar. Students completing adds only are exempt from the requirement of the Financial Aid representative signature.

All appeals are final and will not be reconsidered by the committee.

Financial Aid Representative's Signature _____ Date _____

Office of the Registrar Use Only

Drop Date _____ Additional Comments _____

Registrar's Signature _____

Retroactive Academic Action Petition
(Describe your circumstances on this sheet)

Multiple horizontal lines for text entry.