

EXTENUATING WITHDRAWAL APPLICATION

Registrar's Office, North Vancouver
Email: extenuatingwithdrawal@capilano.ca

PLEASE READ CAREFULLY

Extenuating Circumstances are beyond the student's control and are unpreventable, unpredictable, and unavoidable. Completion and submission of this application form does not guarantee that your request will be granted.

To submit an application:

- Complete the application in full
 - Signature must be in ink or digital; typed signatures will not be accepted
- Attach a **personal statement and supporting documentation** (see Parts 4 and 5 for details)
- Submit completed application in one email to extenuatingwithdrawal@capilano.ca with the subject line: *Student name, Student number - Extenuating Withdrawal* from your myCapU email account.

Please note:

1. Extenuating withdrawals will only be considered once the withdrawal period for the term has ended and not accepted past 30 days after the end of the requested term.
2. Incomplete applications will be closed after 30 days.
3. Withdrawn (W) courses are not eligible.
4. You are encouraged to consult with your instructors to identify alternatives for successful completion of your course(s) prior to applying for an extenuating withdrawal.
5. If you are receiving financial aid in the form of a loan, scholarship, award, or bursary, it is strongly recommended that you contact Financial Aid & Awards to determine if your current or future financial aid will be impacted prior to submitting your application.

For more information on Extenuating Withdrawals, please visit capilano.ca/admissions/course-registration/registrar-office/appeals/

PERSONAL INFORMATION - PART 1

STUDENT NUMBER	LEGAL LAST NAME	LEGAL FIRST NAME
TERM AND YEAR OF REQUEST (e.g. FALL 2025)	PROGRAM OF STUDY	PREFERRED NAME (IF APPLICABLE)
SIGNATURE		DATE (MM/DD/YYYY)

REQUESTED COURSES – PART 2

List all of the courses you applying to be withdrawn from

**Note: If you are choosing to withdraw from some of your courses, you must include an explanation in your personal statement indicating why only certain courses have been affected.*

SUBJECT	NUMBER	SECTION	COURSE NAME

REFUND REQUEST – Part 3

☐ Yes, I am requesting a refund of the tuition and fees for the above courses.

**Note: If you are requesting a refund, you must include a rationale in your personal statement as to why a refund should be considered. Approval of an Extenuating Withdrawal does not guarantee an approval of a refund.*

☐ No, I am not requesting a refund.

PERSONAL STATEMENT – Part 4

Please attach a personal statement detailing your reasons for submitting an application for an extenuating withdrawal. Your statement should be typed and a maximum of 500 words. Personal statements must demonstrate that circumstances differ significantly from other students and include the following information:

- Full legal or preferred name (if applicable)
- Student ID
- Signature
- Statement that includes the desired outcome(s)
 - i.e. refund, withdrawal from all/specific courses, etc.
- A detailed explanation of why you could not drop/withdraw from the course(s) before the add/drop or withdrawal deadlines.

Depending on the situation, the statement should also include one or more of the following discussion topics (please note that these topics are just examples of what could be included in a personal statement. Not all of them will apply to a student's situation or circumstances):

- A chronological timeline of events, the degree of incapacitation, and how those circumstances impacted your academics.
- The steps taken to resolve or inform the instructor(s) of the circumstances faced. If you did not take any steps, an explanation as to why.
- Indicate how many course components were not completed (i.e. exams, essays, assignments, attendance, all or other).
- If requesting a partial withdrawal (anything less than all term courses), include a detailed explanation of why some courses were affected and not others.

SUPPORTING DOCUMENTATION – Part 5

Supporting documentation is required.

Supporting documents may include, but are not limited to:

- A verifiable note/letter from someone in a "Professional Capacity" (Physician, Physiotherapist, Counsellor, Psychologist, Dentist, Lawyer, etc.).
 - Provided on official letterhead or include business stamp/card
- Verifiable letter(s) of support from someone in a "Professional Capacity" or University department.
- Email communication - emails to and from instructor(s)/counselling/student affairs/etc. regarding the situation
- Receipts - medical, prescription, travel, hotel, etc.
- Travel information - plane/train tickets, airline itinerary, etc.
- Proof of Death - death certificate, published obituary, funeral notice, etc.
 - Explaining the relationship to the deceased should be included in the student's personal statement
- Employee information - employee card, employment verification letter, layoff notice, etc.
- A verifiable report or claim - police reports, insurance claims, etc.

Please note: Photographs are not accepted as supporting documentation

REGISTRAR'S OFFICE: AUTHORIZATION

<input type="checkbox"/> GRANTED <input type="checkbox"/> DENIED	Comments:	
Name of approver:	Signature:	Date of approval: