

McLennan Community College

Request for Drop Exemption

Students who wish to request to be exempt from the requirements of the six-course drop limitation for the reasons listed below must complete this form and provide the required documentation to the Office of Student Records as soon as possible or by the end of the next long semester.

Last Name

First Name

MCC Student Identification Number

Telephone

Current Address

City, State, Zip Code

Date

I request to be exempt from the requirements of the Six-Course Drop Limit regulations for the reasons identified below. I understand that I must provide documentation in accordance with McLennan Community College's policy.

- Severe illness or other debilitating condition: Statement from doctor.
- Care of sick, injured or needy person: 1) Statement from doctor regarding illness of the person being cared for. 2) Statement from the sick, injured or needy person regarding the student's role as the care giver **or** in case of a child, statement from student.
- Death of family member or another person who is otherwise considered to have a sufficiently close relationship: Death certificate, obituary from newspaper or copy of funeral program.
- Active duty service with the Texas National Guard or other armed forces by the student, a family member, or a person who has a sufficiently close relationship: Orders from service
- Change in work schedule that is beyond the control of the student: Letter from employer
- *Other**—Student must write a letter regarding the reason and attach to this form. **Other reasons will be reviewed by the institution and additional documentation may be required.*

I request the exemption for the course(s) listed below for the following semester and year: _____

Course Prefix, Number and Section
(Example: ENGL 1301.02)

I certify that the information submitted in this appeal as well as the corresponding documentation is true and complete to the best of my knowledge. I also acknowledge that I have read MCC's Six-Course Drop Limit policy and understand that submitting an appeal along with supporting documentation does not guarantee an approval.

Student's Signature

Date

Return completed form to:

Office of Student Records
McLennan Community College
1400 College Drive
Waco, TX 76708
(254) 299-8507
(254) 299-6210 (Fax)

For Office of Student Records Use Only

Date application received:

Action Taken/Recommendation: