

FOR OFFICE USE ONLY RECEIVED BY: CAMPUS: INTAKE DATE:

Student ID Number

□ No

Date

☐ Yes

Request for In-State Tuition for 3rd Attempt

Please read this form in its entirety before signing below:

Student Name

Student Signature

The following information applies to courses attempted at Daytona State College.

Students are permitted to enroll into the same course a maximum of three times at the same college or institution. The state of Florida requires a student to be charged 100% of the full cost of instruction (out-of-state tuition) on the third attempt unless the college grants a one-time exception to the student due to documented extenuating circumstances and indicate a serious personal situation, financial hardship, or by the receipt of need-based financial aid for the semester in question. Students may not withdraw from the course(s) and will be assigned a final grade other than "W" upon their third and fourth attempt.

Submission Deadline: One week before the start date of the semester in which the course will be taken.

The College response to all appeals will be sent to your FalconMail account.

Prior to submitting an appeal, please read carefully and completely the Appeals Policy and Criteria. This appeal must be completed in its entirety with supporting documentation upon submission.

OPTION I I request an exception to			
ttached a personal statement along with	supporting documentation the	npt based on documented extendat shows what occurred during	
Serious Illness/Injury Non-Voluntary Military Activation	Unforeseen Emer		
cond attempt that prevented you from su Yes	· · · · · ·	~	that occurred during your
not provided at the time of submission to	the college. You also agree	•	•
on my eligibility for need-based financial	aid for the term in question.	Please attach a statement exp	laining what occurred during
Course Subject/Section	Class Number	Semester and Year	Sub-session (Circle one per course)
			A B FULL
			A B FULL
	nted me from completing the course succedicate the appeal criteria of your request a Serious Illness/Injury Non-Voluntary Military Activation Other Extraordinary Circumstance ave you attached a personal statement a second attempt that prevented you from succeded in the circumstance interfered with the Copy of the	dicate the appeal criteria of your request: Serious Illness/Injury	dicate the appeal criteria of your request: Serious Illness/Injury