



REQUEST FOR EXCUSED WITHDRAWAL (EW)

**Return form to the Admissions & Records Office by emailing: admissions@barstow.edu
*Incomplete or illegible forms will not be processed***

Withdrawal from class after the final state mandated drop date as published in Schedule of Classes can only be approved for extenuating circumstances, per Title 5, Section 55024. The California Community College Chancellor's Office has determined that COVID-19 is acceptable reason, and no further documentation is necessary. If you are not dropping due to COVID-19 related circumstances, please use the Request for Excused Withdrawal form.

Name _____
Last First MI

BCC Student ID # _____

Email _____

Address _____

Phone (____) _____

City _____

____ I am requesting a late withdrawal from **ALL** classes for the semester Fall Spring Summer _____
OR

____ I request to be dropped from the specific classes for the semester as listed below (please list specific courses)

CRN Number	Course Name	Instructor	Units
0000	ENGL 1A	Mr. Rose	3

I attest that I am requesting this EW due to:

- Illness for myself or family member
- Acted as a caregiver for someone else that was ill
- I am a first responder
- Loss of childcare
- Economic hardship
- Inability to access wi-fi due to closed facilities
- Increase in work hours because of the COVID-19 emergency

