

Please Select Mitigating Circumstances

Semester:

Date:

Name:

Illness or death of immediate family member

Banner ID#:

Chapter  
Hazlewood

Illness or injury affecting student during enrollment period

Unavoidable change in employment conditions

Unavoidable geographical transfer resulting from employment

Course:

Campus:

**ADD**

**DROP**

Immediate family or financial obligations beyond the control of the student that require dropping class(es) for employment

Course:

Campus:

**ADD**

**DROP**

Course:

Campus:

**ADD**

**DROP**

Course cancelled by school

Course:

Campus:

**ADD**

**DROP**

Unanticipated active military service, including active duty for training

Other

Student Signature

Veterans Center Representative

Business Office Representative



ALAMO COLLEGES DISTRICT  
Northwest Vista College

Please print-save this form as a PDF prior to submitting it to [nvc-veterans@alamo.edu](mailto:nvc-veterans@alamo.edu)