

Administrative Appeal Form	
Date:	
Name:	Empl ID:
Email:	Phone #:
For what semester are you appealing?	
Please check (✔) the type of appeal you are requesting:	
Retroactive Drop: Retroactive Withdrawal:	
Retroactive Drop: When the student obtains a drop backdated to the day Retroactive Withdrawal: When the student obtains a drop after the withd from WU, F or FIN to W if the semester already passed.	
Explain the reason for your appeal. Detail the extenuating circ for which you are appealing and the reason you were unable	
Do you have proof of the explanation above? If so, list credible documents must have dates that coincide with the semester	
Do you plan on registering for classes at Hostos again? If so, pand how you plan to succeed academically moving forward.	please detail how your circumstances have changed



