

# Course Withdrawal Appeal

Date: [Insert Date]

To: [Recipient's Name]

[Recipient's Title]

[Department/Office Name]

[University/Institution Name]

[University Address]

Dear [Recipient's Name],

I hope this message finds you well. My name is [Your Name], and I am a [Your Year, e.g., sophomore] majoring in [Your Major] at [University Name]. I am writing to formally appeal my request for a course withdrawal from [Course Name and Code] for the [Semester/Term] after discussing my situation with my academic advisor, [Advisor's Name].

During this semester, I encountered unforeseen circumstances that negatively impacted my academic performance, including [Briefly explain the reasons, e.g., personal issues, health problems, etc.]. After conferring with my academic advisor, it became clear that withdrawing from this course is in my best interest to maintain my overall academic standing.

I understand the policies surrounding course withdrawal and appreciate the importance of adhering to academic regulations. However, I believe that my situation warrants special consideration. I have attached supporting documentation from my advisor regarding my circumstances.

Thank you for considering my appeal. I am hopeful for a favorable response. Please feel free to contact me at [Your Phone Number] or [Your Email Address] should you require any further information.

Sincerely,

[Your Full Name]

[Your Student ID]

[Your Program of Study]