



Academy of Music Withdrawal Appeal Instructions

If a student feels he or she has an extenuating circumstance which justifies an exception to the DCC withdrawal policy, he or she may complete this form.

- The appeal process is limited to enrolled courses taken within eighteen (6) months of the start of the current semester.
- All requests must be submitted in writing and must include supporting documentation (please see the table below).
- Appeals received without the proper supporting documentation (see below) will not be reviewed.
- Appeals must be made by the student or the parent of the student.
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Criteria for Appeals	Required Supporting Documentation
Death in the student's immediate family (parent or caregiver, sibling, child, spouse/domestic partner)	Death Certificate or Obituary
Unforeseen medical incapacitation of the student or immediate family	Signed letter from the student's medical professional on organizational letterhead verifying that: <ul style="list-style-type: none"> • The student was medically unable to complete their courses • Family medical circumstances were at a severity that the student's presence was required away from school and precluded completion of the course
Involuntary call to Military Duty	Written orders regarding call to Military Duty

Academy of Music Withdrawal Appeal Form

Name: _____

Date: _____

A00 __/__/__/__/__/__ Name of course(s) _____

Address: _____

Phone number: (_____) _____ -- _____

Email address: _____

Please indicate the intent of your appeal (select all that apply):

I would like to be withdrawn from my classes for the appealed term

I would like to request a refund for those withdrawn classes

Please include a letter describing the justification for your appeal, as well as the required supporting documentation, with this form.

Please email all documents to: aomoffice@sunydutchess.edu

Or by mail: Academy of Music
53 Pendell Road
Poughkeepsie, NY 12601

Withdrawal approval does not automatically result in reduced tuition and fee cost or in the removal of assigned collection fees.

I understand the information on this form and I accept that the AOM's decisions are final and are not subject to further appeal.

Student Signature

Date