

UF

INSTRUCTOR GUIDE

# MEDICAL PETITION PORTAL

NAVIGATING THE UNEXPECTED



## MEDICAL PETITION

Unfortunately, there may be times in a student's academic career when unexpected situations arise that interfere with the student's ability to be academically successful in each semester. Such situations include, but are not limited to, physical health issues, mental health issues, learning disabilities, family/personal crises, or death in the family. In such situations, students may wish to consider petitioning for a medical withdrawal.

## FACULTY ROLE

The University Student Petitions Sub-Committee on Medical Withdrawal has been assigned the responsibility of evaluating medical petitions from students seeking a waiver of a university regulation. In many of these cases, instructor input is essential.

The committee's decision will be based on all available evidence, including your input and any medical and/or legal documentation the student provides to the committee. Please complete the instructor recommendation form and provide as many details as possible.

Faculty comments are particularly important to the committee's deliberations. The student may choose not to share the specific details of their petition or their documentation with you. Please do not hold this against the student as all these factors will be considered in great detail when the student's petition is reviewed by the University Student Petitions Sub-Committee.

# INSTRUCTOR RECOMMENDATION FORM

## ONLINE PROCESS

When a student's petition requires an instructor form, you will receive an email message that includes the student's name, term of petition, and course name. There will be a link provided as well as an access code to the Instructor Feedback Form.

Dear Instructor

is petitioning for a Retroactive Semester Medical Drop for the Spring 2019 term. One of the required pieces of documentation for this type of medical petition is an Instructor Feedback Form. You are the instructor of record for RED3307 169E from the Spring 2019 term, in which was enrolled.

Please take a moment to complete the Instructor Feedback Form using the following link with the provided token:

<https://apps.ufsa.ufl.edu/f?p=700:1>

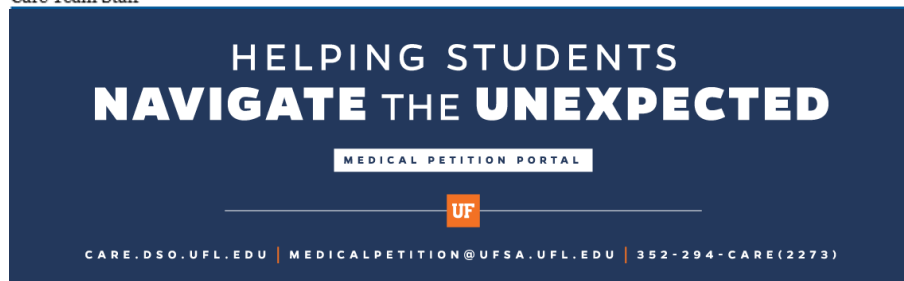
Temporary Access Code: 9E8B026CC62B762CE0538301020AE8D8

has waived his/her right to view the information you provide on this form. The information you provide will be used by the Medical Petitions Committee, in conjunction with other documentation regarding the student's circumstances, to determine whether the student's petition meets the criteria for approval as a medical withdrawal.

Please contact the Care Team at the Dean of Students Office with any questions or concerns you may have about the process by calling 352-294-2273. Thank you for your time and attention to this matter.

Sincerely,

Care Team Staff



Students have the option to waive their right to access the information provided on the instructor form. Whether they choose to waive their right or not, it does not impact their petition.

Once you have accessed the instructor form link, you will be able to complete the instructor form. On this page you will be able to see the student's UFID, the section number for your course, and when the student's petition was started.



## INSTRUCTOR FEEDBACK FORM [INCOMPLETE]

### Student Information

UFID ↑	Student	Course Number	Section Number	Term	Petition Start Date

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### Grades During Term

Final Grade Assigned for Course	During Term Exams
<input type="text"/>	<input type="text"/>
Final Exam/Assignment	Quizzes
<input type="text"/>	<input type="text"/>
Other Assignments	
<input type="text"/>	

### Attendance

Attendance Pattern
<input type="text"/>
Last Date of Attendance
<input type="text"/> <input type="button" value="📅"/>

### Additional Files

Did the student discuss any concerns related to this petition with you during the term

If you have an objection to this request, please detail your objection below

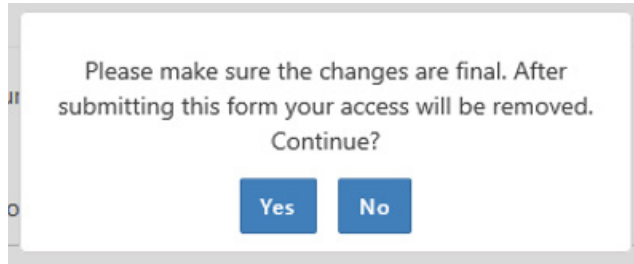
**B I**

My objection is...

Initials \*

*\*We are aware that there may be times where you no longer have access to a student's grades. If this is the case please indicate this in the comment section and be sure to initial the form and submit.*

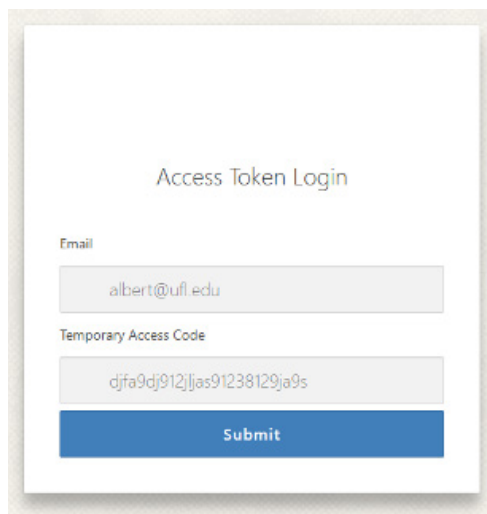
Once you complete the form, please use the submit button. **Please be sure you do not need to make any additional changes, once the form is submitted you will no longer be able to access it.**



Please make sure the changes are final. After submitting this form your access will be removed.  
Continue?

Yes No

Once the instructor recommendation form has been completed and submitted, you will be redirected to this page. In the top right corner you should see a green banner that reads “*successfully submitted feedback.*”



Access Token Login

Email  
albert@ufl.edu

Temporary Access Code  
djfa9dj912ljas91238129ja9s

Submit

QUESTIONS? CONTACT US:

CARE.DSO.UFL.EDU | 352-294-CARE(2273)

MEDICALPETITION@UFSA.UFL.EDU