



# Late Withdrawal Petition

(FOR CURRENT TERM ONLY!!)

(Please Print)

Student Name \_\_\_\_\_ Email: \_\_\_\_\_

Student ID: \_\_\_\_\_ Phone Number: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Permission is requested to WITHDRAW (drop all classes) after the deadline**

**TERM:** \_\_\_\_\_

**Withdrawal from the University (dropping all classes for the term):** A student may withdraw from the university during the first half of the term. The Registrar's Office will determine comparable deadlines for courses less than a term in length. Fees and penalties in place on date of withdrawal apply, see course schedule for details.

**After the deadline, a student may request permission to withdraw only for extraordinary non-academic reasons. Any such request must be completed by the last day of instruction in that term.** The request must include a written explanation of the circumstances leading to the request and documentation, if appropriate. Requests are to be submitted to the Advising & Career Center for appropriate action. **Students may not request a withdrawal from a completed term.**

**Extraordinary circumstance:** (attach additional pages if necessary, as well as documentation if available)

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Drop fees of \$15 per credit will be assessed. There will be no tuition refund or reduction of financial obligation to the University based on processing of this request. I understand that I will receive a transcript notation of "W" for all classes.

I further understand this request may produce a balance owed and it is my responsibility to contact the Cashier's Office and determine what charge, if any, has been added to my account and that this action may necessitate repayment of financial aid. I realize that a hold will be placed on my student record until the balance is paid to the Cashier's Office. This fee charge is subject to a monthly interest charge of 1%. If you believe your circumstances warrant an exception to the published policies, you may appeal; see Fee Facts for appeal process.

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*(If student is unable to sign, please furnish written explanation of those circumstances and the name, address and telephone number of an authority who can provide confirmation.)*

**NOTE:** It is the student's responsibility to ensure the accuracy of their schedule. Check your schedule before the last day of instruction for the term to determine if the request has been processed.

**FORMS RECEIVED AFTER THE LAST DAY OF INSTRUCTION FOR CURRENT TERM WILL NOT BE PROCESSED.**

FOR ADVISING CENTER USE ONLY:	_____ <b>Approved</b> _____ <b>Denied</b>
<b>Director of Advising signature:</b> _____	<b>Date:</b> _____
FOR STUDENT RECORDS OFFICE USE: Date Processed: _____ Processed By: _____ (Rev: 11/06 spl, 11/08jm)	