

UNDERGRADUATE RETROACTIVE WITHDRAWAL REQUEST FORM

TOTAL TERM WITHDRAWAL

Undergraduate students at Eastern Michigan University may request to be withdrawn from a term of enrollment after it has been completed under certain specific circumstances. *Normally, these circumstances are exceptional and clearly prevented normal action to withdraw. These will involve significant mental or physical stress that placed the student under the care of a doctor or therapist. Occasionally, circumstances arise which involve a University administrative error.* Retroactive withdrawals do not involve a refund, and the resulting grade change to "W" will remain a part of the student's permanent academic record.

In either case, when requesting a retroactive withdrawal from a term (that is, all classes for that term), the student must present all of the following:

1. A typewritten statement by the student, summarizing the circumstances and providing detailed information regarding why this situation caused the student to miss University deadlines for withdrawal.
2. Supporting document from a medical source or sources, detailing the dates of treatment, possible consequences and effect on course work. This documentation must be on official letterhead and must be specific to this appeal. In other words, a work excuse, prescriptions, or other documentation will not be sufficient.
3. Evidence of contact by the student with offices such as Financial Aid to explore the possible consequences of a withdrawal after the term has ended.
4. Completion of Part A below.

Upon completing Part A below and attaching all appropriate documentation described above, the student will submit all materials to the Assistant Director of Academic Advising (301 Pierce Hall), who will forward them to the Associate Provost in Academic Affairs for review. If approved by the Associate Provost, the documents will be forwarded to Academic Records with instructions to update the student's academic record. The student will be notified of the decision at that time. Approval is rare and only occurs when the request clearly is an exceptional case.

PART A: To Be Completed by Student:

Student Name: _____ Student Number.: _____

Address: _____ City: _____ State: _____ Zip: _____

Term/Year of Request: FA WI SP SU (YR) _____

I hereby request a withdrawal retroactively from the above term of enrollment. I understand that this is a total withdrawal for the term in question and that current grades for that term will be converted to withdrawals if this request is approved. I understand that a withdrawal does not involve a monetary refund.

Signed: _____ Date: _____

PART B: To Be Completed by Associate Provost or Designee:

Approved Denied (circle one) _____ Date: _____

Associate Provost for Academic Affairs

Comments:

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INDIVIDUAL CLASS WITHDRAWAL

Undergraduate students at Eastern Michigan University may request to be withdrawn from individual courses in a term of enrollment after it has been completed under certain specific circumstances. *Normally, these circumstances are exceptional and clearly prevented normal action to withdraw. They usually involve an administrative error or problem within a department and will reflect strong support for a withdrawal from that department and instructor.* Retroactive withdrawals do not involve a refund, and the resulting grade change to "W" will remain a part of the student's permanent academic record.

In either case, when requesting a retroactive withdrawal from a class or classes, the student must present all of the following:

1. A typewritten statement by the student, summarizing the circumstances and providing detailed information regarding why this caused the student to miss the University deadlines for withdrawal.
2. Supporting document from a departmental source or sources, detailing the circumstances and reasons for supporting a withdrawal. This documentation must be on official letterhead and must be specific to this appeal. It is best to include support from the instructor and department head.
3. Evidence of contact by the student with offices such as Financial Aid to explore the possible consequences of a withdrawal after the term has ended.
4. Completion of part A below.

Upon completing Part A below and attaching all appropriate documentation described above, the student will submit all materials to the Assistant Director of Academic Advising (301 Pierce Hall), who will forward them to the Dean of the appropriate college for review. If approved by the Dean, the documents will be forwarded to Academic Records with instructions to update the student's academic record. The student will be notified of the decision at that time. Approval is rare and only occurs when the request clearly is an exceptional case.

PART A: To Be Completed by Student:

Student Name: _____ Student Number.: _____

Address: _____ City: _____ State: _____ Zip: _____

Term/Year of Request: FA WI SP SU (YR) _____

Course Prefix/Number: _____ Course Title: _____ Credit: _____

I hereby request a withdrawal retroactively from the above course for this term of enrollment. I understand that this is an individual class withdrawal for the term in question and that the current grade for that term will be converted to a withdrawal if this request is approved. I understand that a withdrawal does not involve a monetary refund.

Signed: _____ Date: _____

PART B: To Be Completed by Dean or designee:

Approved Denied (circle one) _____ Date: _____
Dean or Designee (AS BU ED HH TC)

Comments: