



Administrative Withdrawal Request

Complete this form if you wish to request an administrative withdrawal. An administrative withdrawal facilitates the process for a student to receive a grade of "WAD" or "WM" in **all** coursework for a requested semester due to extraordinary circumstances beyond the student's control. Documentation supporting the student's reason **must** be submitted at the time of the request. The request must be completed prior to the last day of the semester immediately following the semester in which the coursework was taken. If granted, the effective date will be the date in which the request and all supporting documentation was received.

University Administration has the authority to withdraw a student at any time for the following reasons: Engaging in behavior that poses signification danger to others, violation of University policies, and severe psychological or physical impairment such that a student is unable to request a withdrawal on his or her own behalf.

Student Information

Student Name: _____ Student ID Number: _____ Date of Birth: _____

Permanent Address: _____
Street Address City State Zip

Telephone #: _____ Mobile Phone #: _____ E-mail Address: _____

Requested Semester (check one): Fall Spring Summer 20: _____

Reason for Administrative Withdrawal Request

State your reason for requesting this administrative withdrawal; attach additional statement if necessary.

Student's Signature: _____ Date: _____

Required Signatures

Department Chair: _____ Signature: _____ Date: _____

Academic Dean: _____ Signature: _____ Date: _____

VP for Academic Affairs: _____ Signature: _____ Date: _____

Office of the Registrar Use Only

Decision: _____ Date Student Notified: _____ Processed by: _____ Date: _____

Enrollment Status Update: _____ Processed by: _____ Date: _____