OThe University of Oklahoma HEALTH SCIENCES CENTER

Withdrawal Request

Process and Steps for Completing the Withdrawal Request Form

Withdrawal occurs when a student drops all of the classes in a term or withdraws from the university after classes have begun. The final day to withdraw from the term is the last day of class. University withdrawal requires reapplication and readmission to the university.

Steps: 1) complete the student information, reason for withdrawal, and last date of attendance at the top of form. A college representative or instructor signature is required for verification of last date of attendance; 2) Beginning the thirteenth week for undergraduate students or eleventh week for graduate and professional students, a grade and signature from the instructor of each course must be obtained; 3) request a signature from the college dean or designee; 4) submit the completed form with all signatures and dates to the Office of Financial Aid. It is the student's responsibility to complete this form accurately and completely.

Policy

Tuition Refund: Withdrawn students are refunded tuition and fees according to the Oklahoma State Regents refund policy. Refer to the Academic Calendar for the specific dates affecting refunds.

Grades: Students withdrawing from all classes in the 1st two weeks of class (or the first week of summer session) receive no grade. Undergraduate students withdrawing from the third week of class (second week of a summer session) through the twelfth week of class (sixth week of a summer session) will receive a grade of "W" in each course of enrollment. Graduate and professional students withdrawing from the third week of class (second week of a summer session) will receive a grade of "W" in each course of enrollment. Graduate and professional students withdrawing from the third week of class (second week of a summer session) will receive a grade of "W" in each course of enrollment. Beginning the thirteenth week of class (seventh week of summer) for Undergraduates and the eleventh week of class (sixth week of summer) for Graduate and Professional students through the last day of classes of the semester or summer term, students will receive a grade of "W" or "F" from the instructor in each course upon withdrawal. Graduate College Students must be passing a course with a grade of "C" or better to drop a course with a "W."

| Student Name (please print | | Student ID Number | Telephone Number | | |
|---|------------|-------------------|---|---|---------------|
| Last Name | First Name | Middle | | (|) |
| College and Major | | Year in Program | Withdrawal | | Term and Year |
| | | | Term WithdrawalUniversity Withdrawal | | |
| Reason for Withdrawal/Verification of Attendance: | | | | | |
| | | | | | |

Reason:

Student's Last Date of Attendance (College Representative or Instructor Signature Required)

| Subject Area | Catalog Nbr | Section | Class Nbr | Course Title | Hours |
|---------------------------------------|------------------|-----------------------------|-------------------------|-----------------------------|-------|
| | | | | | |
| Grade – To Be Completed by Instructor | | Instructor | Signature Date | | |
| □W □F □No Grade □ <u>Other</u> | | | | | |
| Subject Area | Catalog Nbr | Section | Class Nbr | Course Title | Hours |
| | | | | | |
| Grade – To Be Completed by Instructor | | Instructor Signature Date | | | |
| □W □F □No Grade □ <u>Other</u> | | | | | |
| | | | | | |
| Subject Area | Catalog Nbr | Section | Class Nbr | Course Title | Hours |
| Subject Area | Catalog Nbr | Section | Class Nbr | Course Title | Hours |
| | Completed by Ins | tructor | | Course Title Signature Date | Hours |
| Grade – To Be | Completed by Ins | | | | Hours |
| Grade – To Be | Completed by Ins | tructor | | | Hours |
| Grade – To Be | Completed by Ins | tructor Dther | Instructor | Signature Date | |
| Grade – To Be | Completed by Ins | tructor Other Section | Instructor Class Nbr | Signature Date | |

Withdrawal Request Continued

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|---|---|----------------------|---------------|------------------------|------------------|------|-------|
| n Fro | Subject Area | Catalog Nbr | Section | Class Nbr | Course Title | | Hours |
| fron | | | | | | | |
| led 1 | Grade – To Be Completed by Instructor | | Instructor | Signature | Date | | |
| JUIL | | No Grade 🗆 🖸 | ther | | | | |
| - Cor | Subject Area | Catalog Nbr | Section | Class Nbr | Course Title | | Hours |
| es - | | | | | | | |
| Slass | Grade – To Be Completed by Instructor | | | Instructor | Signature | Date | |
| | $\square W \square F \square No Grade \square Other$ | | | | | | |
| List | Subject Area | Catalog Nbr | Section | Class Nbr | Course Title | | Hours |
| ∋ To | | | | | | | |
| pace | Grade – To Be | Completed by Ins | tructor | Instructor | Signature | Date | |
| al S | | ⊐No Grade □ <u>O</u> | ther | | | | |
| Additional Space To List All Classes – Continued from Front | Subject Area | Catalog Nbr | Section | Class Nbr | Course Title | | Hours |
| Ado | | | | | | | |
| | Grade – To Be | Completed by Ins | tructor | Instructor | Signature | Date | |
| | | No Grade D | ther | | | | |
| | | | Auth | orizations a | and Signatures | | |
| Please read each item carefully and initial that yo | | | t you underst | and the terms and cond | itions: Initials | | |
| | I understand that even though I am withdrawing from the University of Oklahoma Health Sciences Center | | | | | | |
| I am responsible for all outstanding financial obligations to the | | | | | | | |
| | I understand that it is in my best interest to contact my Fina the financial implications of my withdrawal. | | | ancial Aid adviso | or to discuss | | |
| | | | | | | | |
| Stu | Student Signature | | | | Date | 2 | |
| | | | | | | | |
| Adv | Advisor Signature (If Required by College) | | | | Date | 2 | |
| | | | | | | | |
| College Dean or College Designee Signature | | | | Date | 2 | | |
| | | | | | | | |
| Graduate College Dean (Required for Graduate Programs) | | | | Date | 2 | | |
| | | | | | | | |
| Fina | Financial Aid Signature | | | | Bursar Signature | | |
| | | | | | | | |
| | | | | | | | |

| Administrative Use Only | | | | | | |
|-------------------------|------------|----------|--|--|--|--|
| Processed By Date | Percentage | Comments | | | | |
| | | | | | | |