

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.

Subject Area

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 $\square W$

Catalog Nbr

Grade - To Be Completed by Instructor

□No Grade

Section

□ Other

Class Nbr

Instructor Signature

Course Title

Hours

Date

Tuition Refund: Withdrawn students are refunded tuition and fees according to the Oklahoma State Regents refund policy.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

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Student Name (please print)					Student ID Number	Telephone Number		ımber	
Last	t Name	First	Name	Middle		()		
Со	llege and Major		Year	r in Program	Withdrawal		Term and Year		
					☐ Term Withdrawal ☐ University Withdrawal				
Re	Reason for Withdrawal/Verification of Attendance:								
Rea	ason:								
Stu	Student's Last Date of Attendance (College Representative or Instructor Signature Required)								
	Subject Area	Catalog Nbr	Section	Class Nbr	Course Title			Hours	
	Subject Area	Catalog Nbr	Section	Class Nbr	Course Title			Hours	
¥	-	Catalog Nbr		Class Nbr			Date	Hours	
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Classes – Additional Space on Back	Grade - To Be Co	Completed by Inst No Grade Ot Catalog Nbr Completed by Inst No Grade Ot Catalog Nbr Catalog Nbr	tructor ther Section tructor her Section	Class Nbr	Signature Course Title Signature Course Title			Hours	

Withdrawal Request Continued Subject Area **Catalog Nbr** Section Class Nbr Course Title Hours Grade - To Be Completed by Instructor **Instructor Signature Date** □ Other □No Grade $\square W$ Œ Subject Area Catalog Nbr Section Class Nbr Course Title Hours Grade - To Be Completed by Instructor **Instructor Signature Date** □ Other □No Grade Subject Area Catalog Nbr **Section** Class Nbr **Course Title** Hours Grade - To Be Completed by Instructor **Instructor Signature Date** □ Other Œ □No Grade Subject Area Catalog Nbr **Section** Class Nbr **Course Title** Hours **Instructor Signature Date** Grade - To Be Completed by Instructor $\square W$ Œ □No Grade □ Other Authorizations and Signatures Please read each item carefully and initial that you understand the terms and **Initials** conditions: I understand that even though I am withdrawing from the University of Oklahoma Health Sciences I am responsible for all outstanding financial obligations to the University. I understand that it is in my best interest to contact my Financial Aid advisor to discuss the financial implications of my withdrawal. Student Signature Date Advisor Signature (If Required by College) Date College Dean or College Designee Signature Date Graduate College Dean (Required for Graduate Programs) Date Financial Aid Signature **Bursar Signature** Administrative Use Only Processed By Date Percentage Comments

Additional Space To List All Classes – Continued from Front