

## COURSE WITHDRAWAL FORM: AFTER DEADLINE

**Before** the deadline for withdrawal from a course, a student applies directly to the Graduate School. To withdraw from a graduate course **after** the deadline for withdrawal, the student must initiate the withdrawal process through discussions with the **Instructor** and the **Department Chair/Coordinator (via regular mail, hand delivery, fax, or email), with a copy to the Instructor**. In the request, the student should explain circumstances and attached copies of relevant supporting materials (e.g. physician’s report, hospital receipt). Each request is handled on an individual basis and is determined by information provided by the student and the student’s academic records. **The Department Chair/Coordinator, in consultation with the appropriate faculty and staff, will review the request. If approved, the student will receive a withdrawal (W) grade.** The student will be responsible for any tuition charges.

**NOTE: Withdrawal from a doctoral course at any time requires the permission of the Chair and may entail a leave of absence from the doctoral program.**

**Policy:** For the complete policy, please see the School of Graduate Studies Academic Catalog for the current academic year (available online).

**Procedure:** Provide the information requested below, attach your letter of request with reasons and any additional materials, obtain approval and a signature from your Department Chair/Coordinator, and return the completed form with supporting letter and any other information to the Graduate School Front Office (number 378).

Student’s Name: \_\_\_\_\_ ID Number: \_\_\_\_\_

Course Prefix & Number: \_\_\_\_\_

Course Start & End Dates: \_\_\_\_\_

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

### Determination of Department Chair/Coordinator:

- Withdrawal approved (Grade = W)
- Withdrawal denied (Grade = WF)

\_\_\_\_\_  
Department Chair/Coordinator Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Graduate School Representative Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Graduate Dean Signature

\_\_\_\_\_  
Date

**Return to:** Graduate School, St. Joseph Hall, 3rd Floor, Room 378 or Scan and E-Mail to [gradschool@chc.edu](mailto:gradschool@chc.edu)  
**Please do not return the form until all required signatures (with the exception of the signature of the Dean) are obtained. Any incomplete forms will be returned to the student. A Graduate representative will get the completed form to the Dean for review and signature.**

**Copies to:** Instructor, Department Chair/Coordinator, Student File

2021-2022