PETITION FOR RETROACTIVE WITHDRAWAL

Name: Date:

ID#: Major: Email:

Local Mailing Address: Local Phone:

Semester/year for which withdrawal is requested:
Spring
Summer
Fall

A petition for retroactive withdrawal may be considered in case of a documented, serious illness or extreme hardship. All items listed on this checklist will constitute the petition.

- Student-written petition signed by the student to include:
  - Rationale for request;
  - Effective date of withdrawal (provide documentation from professors of last date of class attendance);
  - Current major and major during semester during which withdrawal is requested;
- Supporting documentation from physicians, counselor, etc.
- Copy of MSU transcript.
- If the student receives financial aid, a statement from the student that he/she has consulted with the Financial Aid Office and that he/she understands what effect, if any, a retroactive withdrawal would have on the aid.
- If petitioner is a graduate student, statement whether he/she is a recipient of an assistantship or fellowship.

If the petition is approved, the student is to process the withdrawal through the Registrar.

Comments/Conditions: _____
_____
_____

_____	_____	_____	_____
Advisor	Date	Department Head	Date
_____	_____	_____	_____
Dean	Date	VP for Academic Affairs	Date

October 2001