

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