

INSTRUCTIONS FOR GRADUATE STUDENT ADMINISTRATIVE WITHDRAWALS

[Eastern Michigan University policy provides graduate students an opportunity to withdraw from individual classes automatically during the first two-thirds of the term. Subsequent to that period, students can withdraw only if they have special extenuating circumstances, of recent occurrence, which clearly prevent them from completing the course in question. Withdrawals are not automatic. The Dean of the Graduate School will review your request to determine whether the reasons and documentation are sufficient.]

1. Fill out the *Graduate Student Administrative Withdrawal Request Form*. Be aware of the possible implications of withdrawals on financial aid, graduate assistantship, housing, insurance, visa status, and other University services.
2. Write a brief explanation of your special circumstances. These circumstances must have occurred since the end of the current semester automatic withdrawal period (first ten weeks of the semester). Failure to properly drop or withdraw at an earlier time will not be considered sufficient reason. Grade performance is not considered a special circumstance.
3. Extenuating circumstances are those that clearly prevent you from completing course work or examinations, or that currently prevent you from attending class. Such circumstances usually involve a significant illness, a family crisis, a mandatory change of work schedule, or other types of emergency. Such circumstances must have developed recently, not early in the term.
4. Strong recommendations from instructors and department heads will also be considered when determining extenuating circumstances. Such recommendations are used to resolve a significant administrative problem only, rather than to address the issue of poor performance alone.
5. Documentation is mandatory. If you do not provide documentation of your circumstances, your request will automatically be denied. Documentation must be from a source other than you and must serve to confirm or verify the circumstances you have described. Documentation must be the original rather than a copy of a document, except for death certificates or obituaries. Usually the documentation will be summary letters from professionals, such as doctors, attorneys, therapists, work supervisors, or clergy.
6. Decisions will not be made automatically. A copy of the processed form will be mailed to you, but you may return the next day to learn of the decision. Because of federal privacy laws, decisions regarding a withdrawal must only be given to you in person after you have presented proper picture identification.
7. You must continue attending class until a decision has been made. If you discontinue attending class and are not withdrawn, you may risk negative grade consequences, in accordance with attendance and final examination regulations.
8. Any questions regarding these policies and procedures should be directed to the Dean of the Graduate School.

**Eastern Michigan University
Division of Academic Affairs
Graduate School**

GRADUATE STUDENT ADMINISTRATIVE WITHDRAWAL REQUEST FORM

Student Name: _____ Student Number: _____

Local Address: _____
(Street Address) (City) (State, Zip Code)

Course Prefix: _____ Course Number: _____ Sect. Number: _____ Term: FA WI SP SU Year: _____

Course Title: _____

During the Administrative Withdrawal period, graduate students may withdraw from individual classes only when special extenuating circumstances exist outside of the classroom, which clearly prevent the student from completing the course work as planned. It is not possible to withdraw based on grade performance. Non-attendance is not considered an extenuating circumstance, nor is an error in withdrawing during the program adjustment period.

Please note that individual class withdrawals may have a significant impact on financial aid, graduate assistantship, housing, health insurance, visa status, and other University services, especially when such withdrawals bring the total term credits to less than those required to be full-time.

Instructor Name: _____ Instructor Signature: _____

Student Signature: _____

To submit this request:

Fill out the top portion completely and accurately. Attach a brief explanation of your circumstances. You must also attach appropriate documentation, such as a letter from a professional source, such as a doctor, lawyer, or work supervisor. Documentation must be verifiable (include phone numbers) and original. Copies of certain material may be made with the permission of the Graduate School. *Falsification of any information on this form or documentation will be considered a violation of the Student Conduct Code and appropriate measures will be taken.*

GRADUATE SCHOOL USE ONLY

Approved Denied Signature: _____

Comments: