

NC STATE UNIVERSITY

REQUEST FOR RETROACTIVE WITHDRAWAL for DEGREE STUDENTS

This form is **ONLY** for requests to withdrawal from ALL courses for a previous semester.

North Carolina State University Counseling Center
Campus Box 7312
Student Health Center
2815 Cates Ave, 2nd Floor
Raleigh, North Carolina 27695
(919) 515-2423 (phone)
(919) 515-8525 (fax)

INSTRUCTIONS

Please Read and Follow Carefully

1. The Counseling Center is only able to assist with Withdrawals for Degree Students (students who have officially been admitted to a college within the university – this includes FYC and the Transition Program). If you are a Non-Degree Studies Student (NDS, PBS, UGS) seeking to Withdraw from your courses, contact Registration & Records (515-2572) for withdrawal procedures. See [NDS Late Withdrawal/Cancellation Request](#) for more information.
2. Graduate Students should speak to their graduate administrator (Director of Graduate Programs in their academic department) as part of the withdrawal process to understand possible implications of the withdrawal on enrollment status, graduate support plan, etc. If you have not done so prior to the submission of this application it will delay processing of your request.
3. All requests for Withdrawal **MUST** be submitted in writing. It is usually best if you can meet with a counselor in person. If you are unable to come to campus to request a Withdrawal, then complete this form with the appropriate information. All forms must be signed.
4. Please Note: Retroactive Withdrawals are not guaranteed. All decisions regarding Retroactive Withdrawals are made by the Dean of your College (or designee), not by the Counseling Center.
5. You are required to provide appropriate documentation verifying your reason for your Retroactive Withdrawal Request.

Fill in All Blanks or Grey Fields and then Print this Form

Date: ____

Name: _____ Student ID No.: _____

Present Address: _____ City _____ State ____ Zip Code _____

DAYTIME Phone No.: _____ (IMPORTANT: we have to be able to reach you)

Current Classification (e.g.: FR, SO, JR, SR, MR, DR): _____

GRADUATE STUDENTS SHOULD CONTACT THEIR DIRECTOR OF GRADUATE PROGRAMS (DGP) PRIOR TO WITHDRAWAL. Applications submitted without this contact information will be delayed.

I have contacted _____ on _____ (date) about my withdrawal request.

Current Curriculum: _____

Requesting Withdrawal for: _____
Semester/Session _____ Year _____The primary problems that interfere (d) with my academic performance:

Hardship (finances, work, transportation etc.) Yes _____ No _____

Medical (illness or injury) Yes _____ No _____

Psychological (depression, emotional crisis etc.) Yes _____ No _____

The date the problems first interfered with academic performance _____

REASONS FOR MEDICAL/PSYCHOLOGICAL WITHDRAWALS

Please give a brief description of your psychological, medical and/or hardship concerns and explain how your academic situation was impacted. Be sure to include the date of your awareness of psychological and/or medical concerns and dates and types of any treatment or interventions sought. If applicable, please explain how these issues have been resolved or how you are working on resolving them. Use the space available. If you need additional space please indicate that you have attached your description on a separate page.

Insufficient information will delay the processing of your request.

If the difficulties you faced were primarily medical or psychological and you saw an off-campus health provider, please print a [Health Provider Letter](#) from our website to give to your provider. This sheet will outline the documentation that you need from your provider. If you already have documentation from your provider, a counselor will review it for adequacy. If you have not seen an off-campus provider, or if you cannot obtain adequate documentation, a counselor will try to assist you in obtaining further evaluation. Please call or come in if you need this assistance.

If you are applying for a hardship withdrawal, the Dean/designee of your College will require any documentation of the problem that you can reasonably provide. Depending on the circumstances, letters from a physician documenting a family illness, from an employer on change of employment status, hospital records, obituaries, police reports, etc. may also constitute documentation.

REQUIRED:

- I have documentation and am submitting it with this application
- I have documentation and am submitting it under separate cover of this application. On _____ (date) I am Mailing Faxing Other _____
- I contacted my health service provider _____ (name) on _____ (date) and my provider is forwarding documentation directly to the Counseling Center
- I do not have documentation to submit with this application

Reason: _____

PLEASE NOTE: no further action will be taken on your withdrawal application until we receive pending documentation. You must call to make sure we receive your documentation.

Respond to Each of the Following Questions:

1. Do You Plan to Return to NC State?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	
If Yes, when? <input type="checkbox"/> Next Semester <input type="checkbox"/> Within a Year <input type="checkbox"/> More than a Year <input type="checkbox"/> Uncertain					
2. Do you currently hold a non-immigrant Visa (F-1, J-1, other)?(International Students Only)	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	International Students must be cleared by Office of International Services (515-2961) before Withdrawal can be processed. Info at: https://internationalservices.ncsu.edu/current-students/leave-of-absence-withdrawals/
3. Are you living in a Residence Hall on Campus?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	If yes, please contact Housing & Residence Life (515-2440). See info at: http://www.ncsu.edu/housing/policies/checkout.php
4. Are you on a board (meal) plan?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	If yes, please see http://www.ncsudinng.com/dining/plan/change_info.html
5. Have you received any Financial Aid for the semester/session for which you are requesting the withdrawal?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	If yes, contact Financial Aid at 515-2421 to determine any impact Withdrawal may have on repayment of and eligibility for financial aid. You may want to view: http://www7.acs.ncsu.edu/financial_aid/forms/satprorv.pdf
6. Have you received any Veteran's Assistance for the semester/session for which you are requesting the withdrawal?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	If yes, please call the Veterans Affairs Office at 515-3048 to determine impact on your benefits
7. Are you now or have you ever been a student-athlete at NC State? If Yes, which sport (s) and what dates? _____	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	Current and former athletes must be cleared by the Athletic Compliance Office before a withdrawal can be processed. The Counseling Center will assist in this process.

Fill in all blanks or grey fields and then print pages 2-4

What was the last date you attended/participated in any class during the semester you wish to withdraw? _____

Any potential prorated tuition refund, or change in your bill, will be based on the effective date of your Withdrawal Request. The effective date is the end of the semester or the documented last date of class attendance/participation. It is the student's responsibility to provide documentation for any potential effective dates earlier than the last date of classes (e.g. note or email from instructors verifying the last date attended/participated, official documentation showing date hospitalized, moved, etc).

According to the University Cashier's Office: An administrative fee of 5% of the total tuition and fee charges not to exceed \$100.00 will be charged by the cashier's office for all withdrawals processed. This fee will post to your university account after the processing of your withdrawal. This charge is assessed by the university and not the counseling center and is not a charge that we can waive or alter. This is charged for any type of withdrawal including Early Withdrawals.

SIGNATURE AND DATE

I certify that the information given on this application is correct. I understand that an intentional misrepresentation of facts may result in significant penalties. In addition, if any approvals or clearances are required to process this withdrawal request, I hereby authorize NCSU Counseling Center Staff to release information concerning my grounds for withdrawal pertaining to this request to the appropriate University Officials. ALL FORMS MUST BE SIGNED

Date Submitted: _____

Signature of Student: _____

COMPLETING THE PROCESS

- Once you have completed and signed this form and obtained any appropriate documentation, send this information to:
 ATTN: Withdrawal Request
 NC State Counseling Center
 Campus Box 7312
 2815 Cates Ave
 Raleigh, NC 27695

OR fax to: 919-515-8525 ATTN: Withdrawal Request

- IMPORTANT:** Call the Center within a few days after sending in your request to make sure it was received. If you have not heard a decision about your withdrawal request after two weeks of submission please call to check on its status. Do not assume that your withdrawal has been completed or approved simply because you sent in a request. Retroactive Withdrawals are not guaranteed and are granted by the Dean/designee of your college. We *facilitate* this process for the student. In some cases it may be necessary for the student to communicate directly with the Dean/designee as part of the Withdrawal process. We will inform you if this necessary in your case.
- If you answered "Yes" to any of Questions 2 – 7 on page 1, be aware that offices involved with those issues need to 'clear' your Withdrawal (if it is approved) before it can be processed by Registration and Records. Contact the Counseling Center for about clearance steps in your case.
- It is strongly recommended that you contact your Academic Advisor, Financial Aid Counselor, Housing Representative, and/or Registration and Records to ensure that you understand the implication of this withdrawal on your status at NC State University and on your Progress Toward Degree.