MEDICAL WITHDRAWAL FROM A CURRENT SEMESTER



Last Name / First Name / M.I.	Student ID#	
Mailing Address (street, city, state, zip)		
Phone	Vandal Address	
SEMESTER REQUESTING: Spring Summer Fall		
SESSION: Full Semester If other course length, please explain (i.e. 2 nd 5-week session):		
Have you attended any classes this semester? Yes No If yes, <i>estin</i>	nated last date of attendance:/	
If NO, please STOP! You must file an appeal with the Academic Petitions Committee. Have you already		
completed and/or received a grade for any class in this term? Yes		
If YES, please STOP! You must file an appeal with the Academic Petitions C		
previously submitted a form for a complete withdrawal?	Yes \to \to No	
previously submitted a form for a complete withdrawais	res No	
If you answer "YES" to any of the following questions, please see reverse side for		
Did you receive Financial Aid for the semester you are withdrawing from?	☐ Yes ☐ No	
Did you receive Veterans benefits for the semester you are withdrawing from?	∐ Yes ∐ No	
Do you live in campus housing?	☐ Yes ☐ No	
Are you an international student on an F-1 or J-1 visa?	Yes No	
Please check all reasons for withdrawal that apply to you: Medical Mental Health Financial Hardship Family Issues Death in Family Military (please see below)		
	tirin ranniy in wintary (please see below)	
Other:		
If you are withdrawing due to Military Deployment, please stop here, sign	and submit this form with a copy of your official orders.	
I have read the information and procedures provided on this two page	medical withdrawal form.	
I understand that if my medical withdrawal is approved, a hold may be placed on my account preventing future registration until I		
complete assigned tasks designed to promote my successful re-entry to	othe University of Idano.	
Signature	Date// 20	
FOR DEAN OF STUDENTS OFFICE USE ONLY		
Approved Denied Denied with conditions	Received by Dean of Students Office [date stamp]	
Approved Defiled Defiled with conditions	Received by Dean of Students Office [date stamp]	
Ву:		
Date: / 20 CR: 1 2 3 4 5 6 7 8		
Comments:		

REQUIRED ITEMS

Complete Withdrawal from a Current Semester Form
 Student Letter (include the following) Describe your extenuating circumstance(s) that have occurred AFTER the withdrawal deadline. Include specific dates when events occurred and how these circumstances impacted your ability to be academically successful. Explain why you did not withdraw from the current semester BEFORE the deadline. Describe the steps you took to address your extenuating circumstances as they began affecting your academics.
 Gather documentation which support and verify the circumstances and dates stated in your letter. Documentation should be on business letterhead of a certifying person, e.g. doctor, lawyer, counselor, employer, etc. Hospital bills, legal writs, family obituaries, and other related documentation of circumstances are also acceptable. Submissions without supporting documentation will be denied.

ADDITIONAL ASSISTANCE / SUPPORT REGARDING YOUR COMPLETE WITHDRAWAL

If you received Financial Aid for the semester you are petitioning to wthdraw from:

Contact the Financial Aid office at (208) 885-6312 BEFORE submitting this form to learn more about potential impacts of the withdrawal.

If you received Veteran's benefits for the semester you are petitioning to withdraw from:

Contact the Veteran Assistance office at (208) 885-7989 BEFORE submitting this form to learn more about potential impacts of the withdrawal.

If you currently live in on-campus housing:

Contact Housing and Residence Life at (208)-885-6571 to discuss next steps for your housing contract obligations.

If you are an international student on an F-1 or J-1 visa:

Contact the International Programs Office at (208) 885-8984 BEFORE submitting this form to learn more about potential impacts of the withdrawal.

If you received accommodations for the semester:

Contact Disabiltiy Support Services at (208) 885-6307 to discuss next steps for your accommodations.

COMMON QUESTIONS

What is the process of completely withdrawing?

Follow the instructions listed at the top of this form. Submit all required items to the Office of the Dean of Students. The reviewing committee meets regularly, and you can expect to be notified of a decision within 3 weeks of your submission date via your account.

What does it mean to completely withdraw after the deadline?

If you need to medically withdraw (drop all courses) after the <u>published deadline</u>, but before the final week of the current semester, you must submit all required complete withdrawal items to the Office of the Dean of Students (see top section). You must provide a thorough explanation of extenuating circumstances that prevented course completion and you not withdrawing prior to the deadline date on your own.

How do I selectively drop a course after the deadline?

If you need to drop a single class you have been attending, you must follow the <u>procedure outlined</u> by the Registrar's Office. Please contact the Registrar's Office at (208) 885-6731 for more assistance.

What are "extenuating circumstances"?

Extenuating circumstances are generally serious and compelling reasons where the cause of the withdrawal is beyond your control (examples: extended absence due to an immediate death in the family or serious financial hardship due to situation beyond your control).

If you still have questions after reading all of the above information, please contact our office at (208) 885-6757 to schedule a consultation.