

# WITHDRAWAL FORM

Name \_\_\_\_\_ Student ID # \_\_\_\_\_

Email Address \_\_\_\_\_ Telephone # \_\_\_\_\_

Academic Level:  DC  GR  UG Program of Study \_\_\_\_\_ Grade Level/Quarter Level \_\_\_\_\_

**You are not withdrawn from Life University until all sections are complete and all signatures are obtained.**

## STEP 1: COMPLETE LENGTH OF WITHDRAWAL & PLANS FOR RETURN.

Length of Withdrawal (Select One):

- Remainder of Quarter  
 1 Quarter  2 Quarters  3 Quarters or More  Do Not Plan to Return

Effective Term/Year:  Summer  Fall  Winter  Spring Year \_\_\_\_\_

Reason(s) for Leaving:  Academic  Administrative  Change of Career  Financial  
 Medical  Other  Personal

Briefly Describe Reason \_\_\_\_\_

## STEP 2: STUDENT MUST MEET WITH DEAN/ASSOCIATE DEAN/ASSISTANT DEAN FOR ACADEMIC ATTENDANCE DATE.

**DC Students:** Go to the Dean's Office in the Center for Chiropractic Education (CCE) Building.

**GR/UG Students:** Go to the Dean's Office in the Center for Graduate and Undergraduate Studies (CGUS) Building.

This section must be completed prior to going to the Student Advocacy Center to meet with Financial Aid, Registrar, and Student Accounts.

### To be completed by the Dean:

Last day of academic attendance determined by **attendance records:** \_\_\_\_\_

I, \_\_\_\_\_, have determined the date above by the academic attendance records provided by faculty.

Dean/Associate Dean/Assistant Dean Signature \_\_\_\_\_ Date \_\_\_\_\_

## STEP 3: STUDENT MUST GO TO STUDENT ADVOCACY CENTER TO MEET WITH FINANCIAL AID, REGISTRAR, AND STUDENT ACCOUNTS.

Representatives from each department will speak with the student to complete Step 4 of the withdrawal process.

Financial Aid Counselor Signature \_\_\_\_\_ Date \_\_\_\_\_

Registrar Representative Signature \_\_\_\_\_ Date \_\_\_\_\_

Student Account Representative Signature \_\_\_\_\_ Date \_\_\_\_\_

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## STEP 4: STUDENT ACKNOWLEDGEMENTS.

**I am taking a Hiatus (remainder of quarter, 1 quarter, or 2 quarter leave) from Life University with the understanding of the following:**

- If I am withdrawing from the remainder of the quarter, I agree to the last date of academic attendance indicated in Step 2 by the Dean.
- My Satisfactory Academic Progress (SAP) status may be affected with this request.
- I will be notified in writing of any financial aid return within 30 days.
- If I have borrowed federal loans at LU I am required to complete Loan Exit Counseling at [www.StudentLoans.gov](http://www.StudentLoans.gov).
- I will be notified of any balance owed to LU within 30 days. If my balance is not paid, I will be unable to obtain my transcript, diploma, reactivate my program and could be sent to collections.
- When I return I must complete a reactivation form.
- I will need to contact my Financial Aid Counselor and complete any requirements (if applicable).
- I will need to verify my bank account information in EagleNet to receive refunds.
- I will need to meet with my PASS/SPA/ATT Advisor.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

**OR**

**I am leaving for 3 quarters or Permanently Withdrawing from Life University with the understanding of the following:**

- I am withdrawing from all of my courses and agree to the last date of academic attendance indicated in Step 2 by the Dean.
- My course registration for all future quarters will be cancelled.
- My Satisfactory Academic Progress (SAP) status may be affected with this request.
- I will be notified in writing of any financial aid return within 30 days.
- If I have borrowed federal loans at LU I am required to complete Loan Exit Counseling at [www.StudentLoans.gov](http://www.StudentLoans.gov).
- If I return, I must reapply for admission through the Office of Enrollment.
- I will be notified of any balance owed to LU within 30 days. If my balance is not paid, I will be unable to obtain my transcript, diploma, reapply for admission and could be sent to collections.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

**For Office Use Only:**

Total Hours Registered \_\_\_\_\_ Withdrawal Date \_\_\_\_\_

Courses not begun verified and deleted \_\_\_\_\_

Registrar Office Representative \_\_\_\_\_