

THE GEORGE WASHINGTON UNIVERSITY

WASHINGTON, DC

DROP/WITHDRAW PETITION FORM Health Sciences Dean's Office

USE: For Health Sciences students requesting to change their course registration within the current semester.

- **Deadlines:** Course drop and withdraw deadlines are published on the Health Sciences Student Services website: <http://smhs.gwu.edu/academics/health-sciences-programs/student-services/course-drop-refund-schedule>
- Petitions for a DROP or WITHDRAW will be reviewed until the last day of classes of the current semester.
- If a final grade has already been entered, review the *Appeal Procedures for Cases of Alleged Improper Academic Evaluation* policy in the Regulations section in the Health Sciences Bulletin: <http://bulletin.gwu.edu/medicine-health-sciences/>
- Please consult with your academic advisor prior to submitting this form, and be aware of Satisfactory Academic Progress requirements: <https://financialaid.gwu.edu/satisfactory-academic-progress>

Important Definitions

- **Drop (Tuition Refund Eligible):** Courses dropped once a semester begins are subject to the posted refund schedule, which governs the prorated cancellation of semester tuition charges in cases of program adjustment or withdrawal: <http://smhs.gwu.edu/academics/health-sciences-programs/student-services/course-drop-refund-schedule>. No record of the course will be reflected on the transcript.
- **Withdrawal (No Tuition Refund):** Once the course refund period has ended, a dropped course is considered a withdrawal, and a notation of W (Authorized Withdrawal) will appear on the transcript. Course withdrawals are not refund eligible.
- **Unauthorized Withdrawal (No Refund):** There is no automatic course drop for no-shows in on-campus or online courses. The symbol of Z is assigned when students do not attend or only briefly attend a course and in which they have done no graded work; the Z denotes an Unauthorized Withdrawal. Unauthorized withdrawals are not refund eligible.
- **Leave of Absence (LOA):** Applies to students seeking an approved break from their program of study. Please see the LOA policy under Regulations section of the Health Sciences Bulletin: <http://bulletin.gwu.edu/medicine-health-sciences/>

Student Name:

GWID:

GW Email:

Semester:

Degree/Certificate:

Major:

1. Are you past the published deadline for your request?

See above for link to drop/refund schedule.

YES _____ NO _____

If NO – you do not need to complete this form. Complete and submit the Registration Transaction Form:

https://registrar.gwu.edu/sites/g/files/zaxdzs2171/f/downloads/reg_transaction_form.pdf

2. Are you requesting to DROP or WITHDRAW from a course?

(DROP = tuition refund eligible / WITHDRAW = no tuition refund)

DROP _____ WITHDRAW _____

2A. If you are requesting to DROP, is this a 15 week or an accelerated (8, 10 week) course?

15 week _____ Accelerated _____

2B. What percentage refund are you requesting?

15 week options: 100% _____ 90% _____ 60% _____ 40% _____ 25% _____

Accelerated options: 100% _____ 85% _____

2C. If requesting to DROP a course, do you need to register for a Leave of Absence (LOA)? This is required in fall and spring semesters to maintain active status in the program if all courses are dropped.

YES, I need to take a LOA _____

NO, I do not need to take an LOA _____

All requests must include a completed RTF. If requesting an LOA a completed LOA Registration Form must also be submitted: https://smhs.gwu.edu/sites/default/files/LOA_CE_2018.pdf

Justification (required): provide a detailed explanation supporting your request to drop or withdraw from a course after the deadline. If additional space is needed, please submit a separate document.

Documentation (required): submit appropriate documentation (e.g., doctor's note on letterhead, military orders, employer verification) in support of your justification. All documentation must be received at the same time as the Petition, Registration Transaction Form, and LOA Form (if applicable) for timely processing.

Student Signature: _____

Date: _____

Office Use Only		
Advisor check	SFAREGW - eligible to register? YES ____ NO ____ SOAHOLD – any holds? YES ____ NO ____ SHACRSE – prior LOAs? YES ____ NO ____	Comments: Advisor Initial: _____ Date: _____
Program Director	Comments: Approved ____ Not Approved ____ Signature _____ Date: _____	
Department Chair	Comments: Approved ____ Not Approved ____ Signature _____ Date: _____	
Dean's Office	Comments: Approved ____ Not Approved ____ Signature _____ Date: _____	