

EASTERN CONNECTICUT STATE UNIVERSITY UNDERGRADUATE WITHDRAWAL FORM

(IN ORDER TO PROCESS WITHDRAWAL I.D. MUST BE TURNED IN)

Are you attending part-time? Yes No

How many credits are you registered for? _____

FULL-TIME STUDENTS COMPLETE AND SUBMIT TO THE ADVISING CENTER. PART-TIME STUDENTS COMPLETE AND SUBMIT TO THE OFFICE OF CONTINUING STUDIES & ENHANCED LEARNING.

- Students must complete, provide appropriate justification, sign, and date form and surrender their student identification card.
- Students must read, sign, and date the Undergraduate Withdrawal/ Refund Policy on the other side of this form.
- The withdrawal request will not be processed if this form is not received prior to the end of classes.
- A letter confirming the withdrawal from the University will be mailed to the student and copies sent to the Registrar's Office and the Card Services Office within 48 hours.
- Student must apply for readmission through the Admission's Office, if student wants to matriculate at Eastern Connecticut State University in the future.

(Please Print)

Circle class standing at time of withdrawal: Freshmen Sophomore Junior Senior

NAME _____ STUDENT I.D. # _____

HOME ADDRESS _____

TELEPHONE # _____ Street _____ City _____ State _____ Zip Code _____

Semester you began attending Eastern _____

1. Which semester are you withdrawing from? _____
2. Are you receiving financial aid from the University? Yes No If yes, what type(s) of aid are you receiving?
 Grants Loans Work Study Other _____
3. Do you reside in on-campus housing? Yes No If yes, what is your address? _____
4. Are you on the University's meal plan? Yes No
5. Are parent(s)/guardian(s) aware of your decision to withdraw from the University? Yes No N/A

REASON(S) FOR WITHDRAWAL

_____ Transfer _____
(college/university you intend to transfer to)

_____ Medical Is this a permanent disability? Yes No

_____ Military/Other

_____ Military Activation (must contact the Veterans Affairs Office)

_____ Financial

_____ Employment

_____ Completed Academic Goals

_____ Other _____

OVER

REFUND POLICY

FULL-TIME STUDENTS:

The date indicated on the official Withdrawal Form filed with the Bursar will be the financial withdrawal date. Tuition, State University Fee, University General Fee, Student Activity Fee, Technology Fee, and the balance of housing rates are refunded according to the current University and/or Federal refund policies.

The refund schedule is based on a standard semester. A refund for courses that do not fall within the regular schedule will be prorated in the same proportion as above. The board charge is refundable upon withdrawal from the University on a prorated basis. Full weeks will be used to prorate. No refund of either the housing or board charge is made for weekend absences or meals missed. The University reserves the right to apply a refund to outstanding financial obligations. In cases where the student is on financial aid (including student and parent loans), refunds will be restored first to financial aid programs from which the student received assistance. Any remaining balance will then be paid to the student. Normally, six weeks are required to process the refund. NOTE: The Sickness Insurance Fee is not refundable.

Refunds, if any, will be calculated on the basis of the FINANCIAL WITHDRAWAL DATE listed below, according to the current refund policy. Students should not expect refund proceeds, if any, to reach them earlier than six weeks from the DECISION DATE. Students are reminded that balances due, if any, as indicated above, beside the Cashier reference, include items known at the time this request was processed.

My signature below indicates that I have read the refund policy and all information provided on this form is true and accurate to the best of my knowledge.

Student's Signature _____ **Withdrawal Date** _____

FOR ADVISING CENTER AND OFFICE OF CONTINUING STUDIES & ENHANCED LEARNING USE ONLY DO NOT WRITE BELOW THIS LINE

Did student submit I.D. card? ___ Yes ___ No **If no, record reason in comments section.**

Amount owed University based on Cashier's screen _____ Date form mailed or faxed _____

List type of financial aid of applicant _____

Clearance completed by: _____ In Person ___ Telephone ___ Letter ___ FAX
AC/CSEL

General Comments: _____

Processing Date

Director of Advising Center
Assistant Dean, CSEL

BURSAR'S OFFICE CLEARANCE

Bursar's Office

Date

Comments: _____

Distribution List:

AC Secretary ___ Admissions ___ Athletic Director, Sports Center ___ Book ___ Card Services (I.D.) ___
Cashier ___ Financial Aid ___ Housing ___ Library ___ Registrar ___ Student ___ Veterans Affairs ___