

REQUEST FOR COURSE WITHDRAWAL EXCEPTION

Withdrawal from classes from time of registration through the ninth week (mid-point for short term and Summer Sessions):

Students may withdraw from one or more course(s) without faculty permission from the time of registration through the 9th week of the semester without academic penalty. A WD will appear on the student's transcript with no effect on the student's grade point or cumulative average. The student is responsible for officially withdrawing from the course(s) and all costs for the course. Refunds are dictated by University policy found in the *Web Schedule of Courses* book. It is incumbent upon the student to be familiar with such policies.

Withdrawal from classes after the ninth week through the last day of classes before final exams (mid-point for short term and Summer Sessions):

Although rare, there exist extreme life circumstances that prohibit a student from successfully completing the semester beyond the 9th week. These life circumstances may include death of a parent or spouse, incapacitating accident, extended hospitalization, or other severe condition that prevents the student from attending classes and requires them to withdraw from the entire semester. (Failure to attend a class, failure to drop a course, failing work, lack of attendance, dislike of the instructor, making the wrong course choice, lack of interest, conflict in teaching style or similar reasons are not considered extenuating life circumstances. Withdrawal for these reasons is to occur during the first nine weeks of the semester.) Requests for withdrawal after the ninth week must be completed within the semester and be made by the last day of classes before finals week starts. Retroactive requests will not be considered. If requests for withdrawal from **all** classes are honored, a grade of WD will be awarded. Requests for withdrawal from individual courses will not be permitted.

Requests for withdrawals from all courses must be made in the following manner:

1. The student submits to the Dean of Students (SC 400) the *Request for Course Withdrawal Exception* form (available online or in the Dean of Students office) plus required documentation substantiating the extreme life circumstance. The requesting student should retain a copy of the completed form and all documentation. After submitting the *Request for Course Withdrawal Exception*, and substantiating documentation, the student may be required to meet with a member of the Dean of Students staff.
2. The Dean of Students Office will send a filled out form to the instructor informing them of the verification of the extenuating life circumstances that requires withdrawal from the course. The instructor will indicate acknowledgement of the granting of a grade of WD.
3. The Dean of Students Office will inform the student of the final determination after discussion with the respective instructors
4. If the requests for withdrawal are not approved, the Dean of Students will recommend that the student go to their respective advisor (located in the Center for Academic Advising and Adult Learning, New Student Experience, E.O.P., etc.) for advice regarding their academic standing, future course selection and other academic assistance.

REQUEST FOR COURSE WITHDRAWAL EXCEPTION (after the 9th week and before final exams (mid-point for short term and Summer Sessions))

Current Semester: *Winter* _____ *Fall* _____ *Spring* _____ *Summer* _____ **Year** _____

Student Name: _____ **Student ID #** _____

Local Address: _____

MSU e-mail Address: _____ **Phone#** _____

I request permission to withdraw from all the courses I am taking this semester. I am taking

Course: _____ **Section:** _____ **CRN:** _____ **Title:** _____

Course: _____ **Section:** _____ **CRN:** _____ **Title:** _____

Course: _____ **Section:** _____ **CRN:** _____ **Title:** _____

Course: _____ **Section:** _____ **CRN:** _____ **Title:** _____

Course: _____ **Section:** _____ **CRN:** _____ **Title:** _____

Course: _____ **Section:** _____ **CRN:** _____ **Title:** _____

"Last date of attendance" _____

Reason for Request: (Use separate sheet to provide detail if necessary)

All request must be accompanied by appropriate documentation. Attached documentation includes:

Student Signature _____ **Date** _____

**Return to: Dean of Students, Montclair State University, Student Center Room #400,
Montclair, New Jersey 070430**