



Student Ombudsperson Services (S.O.S.)
2008 Webb University Center
Norfolk, VA 23529
757-683-3442
FAX: 757-683-5715
Email: SAHearsU@odu.edu

REQUEST FOR ADMINISTRATIVE WITHDRAWAL FROM THE UNIVERSITY

Student Name: _____
Last First Middle

University ID No.: _____ Class Standing (Fr. So. Jr. Sr.) _____

Current Address: _____ Daytime Phone: _____

City State Zip Code

Email Address: _____

Period Out: (Please check appropriate)
_____ Fall Semester Year _____
_____ Spring Semester Year _____
_____ Summer Semester Year _____

Did you receive financial aid? (Check one) _____ Yes _____ No

Note: If you have received Financial Aid, please be advised that you need to contact your Financial Aid Advisor before submitting this request.

Reason for request: **SUPPORT DOCUMENTATION IS REQUIRED**

- Extended periods of physical or mental illness of the student
- Extended periods of physical or mental illness of immediate family member
- Death of student's immediate family member
- Mandatory job transfers outside of Hampton Roads
- Involuntary changes in employment schedule or military deployment
- Other: Please explain _____

Student's Signature/Date: (required) _____

Request for Administrative Withdrawal from the University

Policy Statement:

During the course of any semester, there will be situations, such as severe illness, death in the immediate family, or disciplinary actions, which will require that the University initiate an administrative withdrawal from the University to assist a student or to implement a University-imposed sanction. "Immediate family" is defined as parents, spouse, children, brother or sister, or any relative living in the household of the student. Stepparents, stepchildren, and stepsiblings are included in the definition of "immediate family." The following procedures will be used.

Administrative Withdrawal Process:

- The request for withdrawal is initiated either by the student because of an extenuating personal situation or by the University because of a disciplinary situation.
- This action will normally be handled by the Vice President of Student Affairs or designee. If the student initiates the withdrawal, the Vice President for Student Affairs office (VPSAO) will determine what verification is necessary and document the situation.
- Once the request has been validated, the VPSAO office will submit a memorandum to the Office of the University Registrar to withdraw the student from **ALL** classes. A copy of the memorandum will be mailed to the student's current mailing address.
- The student's instructors will receive a copy of the memorandum. If the student is withdrawing after the last day to withdraw from classes without penalty, part of the memorandum will include the opportunity for the faculty member to raise objections if the student's classroom performance is such that a withdraw (W) would not be appropriate.
- If the faculty member objects, the faculty member will inform the University Registrar and the student will receive an "F" in the class.
- The request for withdrawal must be initiated by the student within one calendar year counting from the first day of classes of the term for which administrative withdrawal is sought.
- Requests for withdrawal that have the necessary documentation but are received after the one-year deadline may be reviewed by an appeals committee consisting of at least three members and including both faculty and administrators, to be convened by the Student Ombudsperson in Student Affairs. These requests must also include clear and convincing evidence explaining the student's inability to submit the request within one calendar year. Students submitting requests after the one-year deadline are not eligible for a tuition appeal.
- Tuition refund appeals are handled separately and must be submitted to the Office of Finance. **Note: Administrative withdrawals do not guarantee a Tuition Refund**
- Students receiving financial aid should consult their financial aid counselor prior to submitting a tuition refund appeal.

Submitting a Request:

- Requests should be submitted to the Student Ombudsperson Services Office (S.O.S.) located in the Vice President for Student Affairs Office, 2008 Webb Center.

I understand and agree to all of the above terms and conditions.

Name: (Print): _____

Signature: _____ Date: _____

Revised July 16, 2008