

Financial Aid Information:

I **DO** receive Financial Aid

I **DO NOT** receive Financial Aid

Housing Status:

On-campus

Off-campus

Professor Interaction:

I have attached my instructor’s verification of my participation.

Required Checklist (please initial in space provided). Application will automatically be denied without your initials and dated signature:

_____ I read and completed the Application for Administrative Withdrawal (this form).

_____ I attached a maximum one-page, double-spaced, typed (handwritten will not be accepted) narrative that details the reason for my request. I included names of faculty and/or staff with whom I discussed my situation and the nature of my interaction with them.

_____ I attached instructor’s verification from their email account of my last date of participation in their class. Please note: Instructor’s verification of your last date of participation does NOT guarantee that your request will be approved.

_____ I contacted DePaul Central and my student health insurance provider to learn about possible financial aid, tuition, and insurance billing implications.

_____ If I live on-campus, I have followed up with the Department of Housing Services about possible implications.

_____ I understand that approval of this request does not guarantee any tuition refund or credit. Questions about tuition may be directed to OFA_AdmWdrl@depaul.edu.

_____ I contacted my International Student and Scholar Services advisor to talk about how this request may impact by student visa. (For international students only)

_____ I attached all documents together. I understand that this appeal will be automatically denied without ALL required documentation, my initials in the left margin, and my dated signature below.

_____ I understand that I may only have ONE successful appeal for an administrative withdrawal to the College of Science and Health during an academic career.

_____ I understand that submitting this appeal does NOT guarantee that my withdrawal request will be approved. If the appeal is approved.

_____ I understand that the withdrawal will appear on my official transcripts as a WA.

Student Signature: _____	Date: _____