

COMPLETE WITHDRAWAL FORM

STUDENT ID	LAST NAME	FIRST NAME	PROGRAM & TRACK	EMAIL ADDRESS

A complete withdrawal means withdrawal from all courses for the semester.

If the student is requesting a leave of absence, the student must also complete and submit a *Leave of Absence* form (<https://links.emory.edu/REGI>).

A student who plans to return in a future semester, must fill out a *Reenrollment After Absence* form (<https://links.emory.edu/REGI>) within 60 days of the anticipated return date. Students are not guaranteed reenrollment. Reenrollment will be granted based on an evaluation of the student's ability to succeed and space availability in class and clinical. Refer to the reenrollment process in the Student Handbook found on the School of Nursing website at www.nursing.emory.edu.

Complete Withdrawal Process:

The student should initiate the withdrawal request with their program director after discussing their options. *The Complete Withdrawal form must be submitted within 10 days of this discussion*, so that appropriate University Offices can be notified. This request is time sensitive and the request cannot be backdated.

1. Student initiates a meeting/sends an email to their assistant dean/program director/specialty coordinator to discuss withdrawing from all classes.
2. Depending on the reason for the complete withdrawal, the student may initiate a *Leave of Absence Request*.
3. Student must complete the *Complete Withdrawal form* and sign the document.
4. Student submits the completed *Complete Withdrawal form* via the Regi System (<https://links.emory.edu/REGI>).
5. The remaining required signatures will be obtained by the Office of Education.
6. Refer to the Student Handbook on the School of Nursing website regarding grading when a student withdraws from a course(s). This is a time dependent process.
7. A student wishing to reenroll after a semester or more absence must submit a *Reenrollment after Absence form*. This form must be completed, signed and returned at least 60 days before the desired semester of enrollment.

8. A student who will not be returning to the School of Nursing should submit a written request via the REGI, *Request for Registration Support* to be withdrawn from the School of Nursing, (<https://links.emory.edu/REGI>).
9. For questions regarding tuition refunds, please contact the Emory Office of Student Financial Services at 404-727-6095. If the student has received any type of financial aid, they must contact Emory Financial Aid Office at 404-727-6039.

Enter all courses for the semester below.

Course #	Course Title	Class #	ADMINISTRATION USE ONLY		
			W	WF	Program Director

Effective Date* _____

*The effective date is defined as the date the student notifies a faculty/program director/specialty coordinator/assistant dean of their request to withdraw. **The form must be submitted and processed within 10-days of notification.** Failure to do so may affect tuition refund, financial aid refunds and final course grade entered on the transcript. Students should refer to the Student Handbook for the Withdrawal process.

Reason for Complete Withdrawal

Personal

Job Related

Financial

Other

Additional Information:

Do you plan to return to the School of Nursing? Yes No

If yes, what is your anticipated Semester/Date to return? _____ Semester _____ Date

This is a time-sensitive form.

This form will be returned if all parts are not completed.

Student Signature ***Print Name*** _____
Date

Program Director Signature ***Print Name*** _____
Date

Assistant Dean Signature ***Print Name*** _____
Date

***A copy of the completed form will be sent to the student once signatures have been obtained.*