

## Notification of Withdrawal

Students who withdraw voluntarily from the School of Social Work prior to the completion of courses during a semester must submit their request for withdrawal by submitting the appropriate form to the Associate Dean for Student Affairs. This withdrawal will become part of the student's permanent record. Once a withdrawal has been approved by the Associate Dean for Student Affairs, the student will be notified. Mere absence from classes does not reduce a student's financial obligation or prevent the assignment of a final grade. Students who stop attending classes without officially withdrawing from the course will be liable for all corresponding tuition and fees, and will receive grades of "F" (Fail) at the end of the semester. Students who do not register or request an official leave of absence by the last date to register for courses will be administratively withdrawn from the School. Students may return the following semester, but will be required to reapply.

1. **Name:** \_\_\_\_\_ **RU ID#:** \_\_\_\_\_  

*Last Name*
*First Name*
*Middle Initial*
  2. **Rutgers Email Address:** \_\_\_\_\_
  3. **Current Mailing Address:** \_\_\_\_\_  

*Include Number, Street and Apt. Number*
*City*
*State*
*Zip Code*
  4. **Phone Numbers:** \_\_\_\_\_  

*Home Telephone Number (incl. area code)*
*Business Telephone Number (incl. area code)*
*Mobile Telephone Number (incl. area code)*
  6. **Location:** (please check one) ☐ **New Brunswick** ☐ **Newark** ☐ **Camden**
  7. **Program:** \_\_\_\_\_
  8. **Are you enrolled at the School of Social Work on a student Visa (F-1, J-1)?** ☐ **Yes** ☐ **No**
  9. **Are you receiving Financial Aid?** ☐ **Yes** ☐ **No**
  10. **Are you withdrawing for the semester or entirely from the MSW program?** \_\_\_\_\_
  11. **Have you been absent from the School of Social Work before?** ☐ **Yes** ☐ **No** **When:** \_\_\_\_\_
- I will be withdrawing from classes at the School of Social Work for the \_\_\_\_\_ due to: (indicate reason)  
*(semester & year)*
☐ Academic ☐ Personal ☐ Financial ☐ Health ☐ Relocation  
☐ Transfer to (please explain): \_\_\_\_\_ ☐ Other (please explain): \_\_\_\_\_  
 Explain briefly: \_\_\_\_\_

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**RETURN TO OFFICE OF STUDENT AFFAIRS**

\_\_\_\_\_  
Program Coordinator

\_\_\_\_\_  
Date