

Please read and acknowledge the following: Submitting this form after the course withdrawal period has begun will result in a "W" grade for your classes unless a grade has already been awarded.

The New Paltz transcript will include a notation to indicate withdrawal from college.

There may be academic and financial implications for this decision. You may exhaust your grace period for student loan repayment if you withdraw from college.

Federal Aid may be adjusted based on the percentage of the semester completed, possibly resulting in a balance being owed to the College. This is known as a Title IV Recalculation. Future federal aid may be affected by excessive "W" grades. Consult with Student Financial Services, WH 124, for detailed information on the effect of your leave or withdrawal on your progress towards degree and aid eligibility. Direct Loan borrowers must complete exit counseling with Student Financial Services or online at studentloans.gov.

Excelsior Scholarship recipients may lose eligibility for the current or future semesters, depending on the timing and circumstances of the withdrawal. Consult Student Financial Services for additional information.

Students who receive state or federal loans and are withdrawing, must contact the Student Loan Coordinator, WH 124, for an exit interview.

Students who receive support from the Tuition Assistance Program (TAP) should contact the Office of Student Accounts to determine the financial impact of the withdrawal from college.

Student's Full Name

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Student ID

Obtain all applicable signatures before returning this form.

Educational Opportunity Program Participant

Signature of EOP Advisor

Advancing Completion through Engagement Participant

Signature of ACE Advisor

Initial date of contact by student* Initial date of contact by student*

International Student

Signature of International Advisor

Military Affiliated Student

Signature of OVMS Staff

Initial date of contact by student* Initial date of contact by student*

On Campus Resident Student Last date in residence: _____

Signature of Director of Residence Life

Initial date of contact by student*

All students, whether or not they receive aid, must obtain a signature from the Office of Student Accounts, WH 114.

Signature (REQUIRED)

Initial date of contact by student*

By signing this form, I am certifying that I understand the conditions of this request.

Student's Signature

Date

Return completed and signed form to the Registrar (WH 115) for final approval

Registrar's Signature

Initial date of contact by student*

* This is the date the student first contacted your office about this withdrawal.

Special Circumstances Refund Request

For students withdrawing from all classes prior to the midpoint of the semester only. Students who withdraw from college prior to the course withdrawal period for circumstances beyond their control, may contact Students Accounts (stuacct@newpaltz.edu) to see if a refund request is applicable. All questions about refunds should be directed to Student Accounts stuacct@newpaltz.edu.