

Course Withdrawal Form Rhode Island College Registrar's Office

Course Withdrawal Policy

After the add/drop period has ended, students may withdraw from a course through the end of the course withdrawal period:

• Undergraduate and Graduate course withdrawal deadline: November 6th at 4:30pm

- BPS Student course withdrawal deadlines: Session 1- September 13th at 4:30pm, Session 2- November 8th at 4:30pm

Course withdrawals are <u>not</u> eligible for a refund of tuition and fees. After a course withdrawal is processed, a "W" will be entered for the course on the student's transcript. Note: W's do not affect the GPA. No credits will be EARNED, but will count towards ATTEMPTED credits.

Complete the student section, then have your instructor complete and sign the instructor section, and email to <u>coursewithdrawal@ric.edu</u> by the course withdrawal deadline. *Note: if you are unable to <u>obtain the instructor's signature</u>, please see the Instructor's Chairperson for their signature.

| Student Section | | | |
|---|-------------------------------------|-------------------------|--|
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| Student's Full Name | Student | Student ID Number | |
| I request to be withdrawn from: | | | |
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| - Tul | | | |
| Course Title | Course Number | Section Number | |
| Student Acknowledgement | | | |
| Students are strongly urged to talk to their advisor and the course instructor be following groups are STRONGLY advised to contact the appropriate office pri are no unintended consequences: | | | |
| • Financial Aid Recipients: Contact Financial Aid, Building #3, 401-456-803 | 33, <u>financialaid@ric.edu</u> , _ | Find Your Financial Aid | |
| Counselor | D 400 401 / 10 0 | 470 Milit | |
| Veterans Benefits Recipients: Contact Veterans Resources, Student Union Room 422, 401-612-3470, Military Resource Center | | | |
| Student Athletes: Contact your <u>Athletic Compliance Officer</u> | | | |
| International Students (F & J Student Visas): Contact <u>Lehidy Frias</u> HOPE Scholarship Eligibility: Contact HOPE@ric.edu | | | |
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| I promise to pay Rhode Island College, its agents or contractors, any indebte withdrawal. Additionally, I realize that a course withdrawal may affect certain programs and Satisfactory Academic Progress requirements. | | | |
| I have read and understand the Student Acknowledgement section. By che authorize RIC to withdraw me from the course listed above. | cking the box and signi | ing this form, I hereby | |
| | | | |
| Student Signature | Date | | |
| Siddelli Signalore | Dale | | |
| Instructor Section | | | |
| I acknowledge that the student and I have discussed their decision to withdraw | from this course, and that | the course | |
| information and last date of attendance are correct. *Note: for online/hybrid co | | | |
| C. L. V. L. I.D. L. CAN. L. | | | |
| Student's Last Date of Attendance | | | |
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| Instructor or Department Chair Signature | Date | | |
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