



# Graduate School Withdrawal

Submit completed form to: UCA Graduate School, 201 Donaghey Ave. TORW 328, Conway, AR 72035 or to ucagradschool@uca.edu

Name: \_\_\_\_\_ UCA ID#: \_\_\_\_\_

Full Mailing Address: \_\_\_\_\_

**\*This will become your permanent address of record**

Phone: \_\_\_\_\_ Email (non-UCA) \_\_\_\_\_ Program: \_\_\_\_\_

**READ CAREFULLY:** I understand that I am responsible for paying any outstanding charges to the University associated with my enrollment and withdrawal, that I am responsible for clearing any outstanding obligations owed the University and that failure to do this may impact upon my ability to enroll or receive any other services provided by the university in the future. I understand that withdrawal may require my repayment of federal financial aid, in accordance with federal guidelines.

**\*\*You must contact the Office of Student Financial Aid (501-450-3140) prior to submitting this form if you have any type of financial assistance.**

**\*\*Contact Student Accounts (501-450-5015) for information about the student withdrawal and refund policy.**

**\*\*I understand that my academic standing may affect my eligibility for readmission at UCA and admission to other institutions of higher education in the future.**

Choose One (1) and select the term from the drop-down box:

**SEMESTER:** I would like to withdraw from UCA for the \_\_\_\_\_ term.  
A graduate student may fully withdraw from the current semester no later than the official date published on the academic calendar.

**PERMANENT:** I would like to withdraw from my graduate program at UCA for the \_\_\_\_\_ term. I wish to be withdrawn from ALL the classes in which I am enrolled, including future terms. **NOTE:** You MUST REAPPLY if you desire to return to the university.#

Are you currently enrolled in classes?

\_\_\_\_\_ Yes                      \_\_\_\_\_ No

Do you plan to return to UCA?

\_\_\_\_\_ Yes, next semester      \_\_\_\_\_ Yes, within a year      \_\_\_\_\_ No

\_\_\_\_\_  
Student Signature & Date

-----**For Office Use Only**-----

_____ Inactivated (Permanent Withdrawal only)	_____ Applied to Graduate
_____ Department Notified	_____ Registrar
_____ Graduate Assistant	_____ Library
	_____ Financial Aid
	_____ UCA Police
	_____ SGASTDN
	_____ Letter

\_\_\_\_\_  
Dean of the Graduate School Signature & Date

Received by Department