



## Withdrawal Form

Submit this form using SEAM's Online form: <https://support.sis.jhu.edu/case>

Any student wishing to withdraw from a program must first consult with his/her faculty advisor. Depending on the date of the withdrawal, the student may be responsible for all non-refundable fees and non-recoverable costs associated with their program. Withdrawal is granted when the student no longer wishes to be actively pursuing an academic course of study at the School of Education. When a student withdraws:

- The Office of the Registrar cancels the student's registration for any future term(s), if applicable.
- The Office of Financial Aid suspends financial aid to the student, if applicable
- The Office of International Services performs duties as required by US federal regulations regarding persons no longer eligible to study at the University.

**NOTE: A student who formally withdraws from a program, but who subsequently wishes to be reinstated, must re-apply following the School's regular application process.**

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TODAY'S DATE: \_\_\_\_\_ STUDENT ID: \_\_\_\_\_ SSN (last 4): XXX-XX- \_\_\_\_\_

NAME: \_\_\_\_\_  
   LAST  FIRST  MIDDLE

PHONE NUMBER: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

PROGRAM(S) IN WHICH YOU ARE ENROLLED: \_\_\_\_\_

ACADEMIC ADVISOR: \_\_\_\_\_

TERM OF WITHDRAWAL: TERM: \_\_\_\_\_ YEAR: \_\_\_\_\_

**REASON(S) FOR WITHDRAWAL:**

Financial \_\_\_\_\_  
 Health \_\_\_\_\_  
 Academic  
 Difficulty \_\_\_\_\_

Family Responsibilities \_\_\_\_\_  
 Work Conflicts \_\_\_\_\_  
 Other: \_\_\_\_\_

ARE YOU CURRENTLY ENROLLED? \_\_\_\_\_NO \_\_\_\_\_YES

DO YOU WISH TO BE WITHDRAWN FROM YOUR CURRENT COURSEWORK? \_\_\_\_\_NO \_\_\_\_\_YES

NOTE: You will NOT be withdrawn from your current coursework if it is beyond the date to withdraw for the term.  
 Please refer to the Drop/Withdrawal Calendar.

Are you an International student? \_\_\_\_\_NO \_\_\_\_\_YES

Are you currently receiving Financial Aid? \_\_\_\_\_NO \_\_\_\_\_YES

Are you currently receiving Veteran's Benefits? \_\_\_\_\_NO \_\_\_\_\_YES

**I AFFIRM THAT THE INFORMATION ON THIS WITHDRAWAL FORM IS ACCURATE AND THAT I HAVE INFORMED MY ADVISOR THAT I AM WITHDRAWING FROM MY PROGRAM AND THE SCHOOL OF EDUCATION.**

Student's Signature \_\_\_\_\_

Date: \_\_\_\_\_