

**WINTHROP UNIVERSITY  
EXTENUATING CIRCUMSTANCES COURSE WITHDRAWAL**

**To be completed AFTER the last day to Withdraw for the specific course(s).  
See Registration Calendar for specific dates.**

**THIS FORM IS NOT TO BE USED TO REQUEST TUITION ADJUSTMENTS OR REFUNDS.**

\*\*If you are withdrawing completely from the University, please use the "Withdrawal from Winthrop University Survey" form.\*\*

Student Number	Name	Major
Phone Number	Address	Email Address

I am withdrawing from the following course(s) because of extenuating circumstances:

Subject	Course#	Section #	Term	Instructor

Extenuating circumstances include the following: death of an immediate family member; traumatic and unforeseen circumstances which are considered beyond a student's control; prolonged emotional instability, physical injury or illness which has resulted in the student's inability to complete academic responsibilities; or a change in nonacademic employment beyond the student's control. I am requesting to be withdrawn from this/these course(s) because

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Student's signature \_\_\_\_\_ Date \_\_\_\_\_

Are you a student athlete? \_\_\_\_\_ Are you an international student? \_\_\_\_\_

Please attach official supporting documentation (physician/counselor note, obituary showing relationship, employer note, e.g.) of your circumstances to this form and bring it to the Office of Records and Registration, 126 Tillman Hall. Students may not request course withdrawals after the last day of classes. The Registrar will determine whether the withdrawal meets the criteria for the N grade and will notify the student of this decision.

TO BE COMPLETED BY REGISTRATION PERSONNEL ONLY:      Approved  Not Approved

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

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

Processed By: \_\_\_\_\_

Student Notified: \_\_\_\_\_

\_\_\_\_\_  
Registrar Signature