



Petition for Retroactive University Withdrawal

In special and unusual circumstances beyond the student's control, a student may, with documented evidence, petition for retroactive withdrawal from the University. The request must be submitted to the Registrar within one year of the withdrawal term. If approved, all grades awarded during the withdrawal semester will be changed to a grade of **W**.

Student Information (Please Print or Type)

Student Name: _____ **Student ID:** _____

UNA E-mail: _____ **Phone:** _____

Term Requesting Retroactive Withdrawal: _____

Note: Retroactive University Withdrawal may adversely affect prior and future financial aid, scholarship award, health insurance, athletic eligibility, etc.

Incident requiring withdrawal from the University:

☐ Medical Emergency ☐ Death of Immediate Kin ☐ Military Deployment ☐ Other*

**If other, describe incident:* _____

Date of incident causing withdrawal from the University: _____

Documentation Attached:

☐ Petition Letter (*required*) ☐ Legal Documentation ☐ Military Orders ☐ Medical Documentation
☐ Death Certificate, Obituary, Proof of Kinship ☐ Other: _____

Signature(s)

Student Signature*: _____ **Date:** _____

**By signing this form I am acknowledging that I have up to twelve (12) months following the end of the semester for which the withdrawal is requested to apply for retroactive withdrawal from the University. I recognize that petitions filed after this time may or may not be accepted. Further, I accept that all course grades for the term requested will be changed to "W" and that submission of any fraudulent materials will subject me to immediate judicial referral.*

Student Financial Services Signature*: _____

**Required if Financial Aid was received.*

Form should be submitted to the **Office of the Registrar** with appropriate documentation and signatures.