

**UHCL 6 DROP EXEMPTION WITHDRAWAL FORM**

This form is only for students who have reached the 6 drop limit and are requesting to be dropped (withdrawn) from **all** classes for the semester.

Name: \_\_\_\_\_ Student ID Number: \_\_\_\_\_  
Last First MI

Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Year: \_\_\_\_\_ Semester:  Fall  Spring  Summer

Academic School:  Education  Business  HSH  SCE  Non-Degree

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**For Requests for Administrative Withdrawal:** Check one option below and attach written documentation

- 1. a severe illness or other debilitating condition that affects the student's ability to satisfactorily complete the course;
- 2. the student's responsibility for the care of a sick, injured or needy person if the provision of that care affects the student's ability to satisfactorily complete the course;
- 3. the death of a person who is considered to be a member of the student's family or who is otherwise considered to have a sufficiently close relationship to the student that the person's death is considered to be showing of good cause;
- 4. the active duty service as a member of the Texas National Guard or the armed forces of the United States of either the student or a person who is considered to be a member of the student's family or who is otherwise considered to have a sufficiently close relationship to the student that the person's active military service is considered to be a showing of good cause;
- 5. the change of the student's work schedule that is beyond the control of the student, and that affects the student's ability to satisfactorily complete the course.

**OUTSTANDING DEBTS**

Any student withdrawing from the University of Houston-Clear Lake will be held accountable for any outstanding debt to the university, to include the repayment of financial aid funds. Failure to pay outstanding debts will result in the withholding of a student's official transcript and/or diploma.

**Financial Aid:** Students may contact Financial Aid. Federal regulations require that UHCL perform a Return of Title IV Funds calculation. A portion of any disbursed financial aid for this term will need to be returned to the federal programs.

**Complete withdrawal agreement:** I understand that I am requesting to be withdrawn from all classes for the above selected semester.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Provost Office: \_\_\_\_\_ Date: \_\_\_\_\_

Request Approved  Request Denied