



SUBJECT: Medical Hardship and Compassionate Withdrawal

REVIEWED/REVISED: 4/2015; 2/2020

PURPOSE: To allow students facing extraordinary circumstances preventing continuation in

his/her course to apply for a Medical Hardship Compassionate Withdrawal from

one or more courses.

POLICY OWNER: Chief Student Officer/Dean of Students

Medical Hardship Withdrawal Request:

A student may request and be considered for a Medical Hardship Withdrawal in one or more courses in extraordinary circumstances in which serious illness or injury (to student or family member) prevents the student from continuing her/his course(s) in a particular term and an arrangement with instructors for an extension or an incomplete grade is not possible.

Examples may include:

- Injury/illness with prolonged recovery. Prolonged recovery is defined as continuous absence for more than two weeks of class and assignments.
- Psychological condition requiring hospitalization or intensive outpatient care
- Complications as a result of pregnancy or other medical condition
- Severe episode(s) resulting from a chronic medical condition
- Infectious disease requiring specific isolation
- Non-elective surgery with prolonged recovery
- New diagnosis of life-threatening condition
- Documented medical complications from sexual or other violent assault

Compassionate Withdrawal Request:

A student may request and be considered for a Compassionate Withdrawal when extraordinary personal reasons, not related to student's personal physical or mental health, prevents the student from continuing her/his course(s).

Examples may include:

- Death of a student's family member i.e. parent, spouse, sibling, father-in-law, mother-in-law, grandparent, grandchild, or child.
- Care of a seriously ill child, parent, or spouse
- Personally affected from a natural disaster i.e. fire, flood, tornado, etc.

Page 1 of 2 Policy Id#

Requests are submitted to the Director of Advising Services prior to the beginning of the next semester, unless extenuating circumstances exist. The student or the student's academic advisor may initiate the request.

PROCEDURE:

- 1. The student should submit the completed request form (attached), written statement outlining the reason for the request, and appropriate documentation to the Director of Advising Services prior to the beginning of the next semester.
- 2. Within five (5) business days of receiving the request, the Director of Advising Services will review the request and documentation, in consultation with the academic Program Director.
- 3. If additional documentation is needed, the Director of Advising Services will notify the student. The student will have ten (10) business days to provide the additional documentation.
- 4. If no additional documentation is needed, the Director of Advising Services will forward the request and documentation to the Dean of Students for review by the Dean's Council, Director of Advising, and Vice President Business & Operations (VPBO).
- 5. The Dean's Council, Director of Advising, and VPBO will make a decision within ten (10) business days after receiving the request. An individualized care plan will be established to address financial aid, academic standing, and advising.
- 6. Once a decision is reached, the Director of Advising will send written notification to the student. Notification will include recommendations from the Academic Dean of the student's program of study and individualized care plan. A copy of this notification will be sent to the student's academic advisor, Program Director, Financial Aid, Business Office, and the Registrar, as necessary.
- 7. A grade of 'WX' will be awarded by the Registrar for the course(s) to which the withdrawal was approved.
- 8. The Director of Advising Services is responsible for retaining Medical Hardship and Compassionate Withdraw requests, case files, decision, and care plans.

Page 2 of 2 Policy Id#

REQUEST FOR MEDICAL HARDSHIP/COMPASSIONATE WITHDRAWAL



Date

Instructions: Complete this form and submit to the Director of Advising Services. Include a brief statement on a separate sheet of paper outlining the reason for your request, including why/how the condition prevented completion of your coursework. A Medical Hardship/Compassionate withdrawal request must also be accompanied by documentation of the reason for the request. Documentation necessary for **Compassionate Withdrawal request** is determined on a case-by-case basis by the Director of Advising

Services depending on the reason for the request. Documentation for a **Medical Hardship request** must include the following from the healthcare provider on their letterhead with the provider's signature:

- the date of onset of the illness/injury
- dates of medical care or hospitalization
- general nature of the medical condition

Dean's Council Signature

Name:				Student ID#:		
Last Name		First Name	Middle Name			
Mailing Address:	Number	Street	City	State	Zip Code	
	Number	Street	City	State	Zip Code	
Phone Number:)	Email Address:			
am requesting a M	1edical F	Hardship / Compassio	nate Withdrawal for the Fall / Spr			
ly last date of atte	endance	was//	. (Circle	e one)	(Year)	
ourse(s) for which	the wit	thdrawal is requested	1:			
Course Prefix/N	Number	Course Name			Number of Credits	
Financial AiStudents wi those funds	d recipie th educ	ents may be responsik ation benefits throug	course approved for a medical har ole for repayment of funds. A tuiti h the Veterans Administration or I a Medical Hardship/Compassionat	on refund and/or credi Department of Defense	t is not guaranteed. may be required to r	
Director of Advising Se	rvices Sign	natura	Recommend Approval:	☐ Yes ☐ No	Date	
			Recommend Approval:	□ Yes □ No		
Vice President Busines	s & Opera	itions			Date	
			☐ Approved	□ Danied		