

**COMPLETE WITHDRAWAL/  
LEAVE OF ABSENCE**

ENROLL-STATUS-P (Complete Withdrawal)

ENROLL-STATUS-T (Leave of Absence)

*Print clearly and use ink (no pencil).*

Royal ID	Name		
College CAS      KSOM      PCPS	Academic Class Freshman      Sophomore Junior          Senior Graduate	Effective Date	Anticipated Return Date (if applicable)
Advisor/Mentor/Program Director	Scranton Email Address  @scranton.edu		
Cell Phone Number	Personal Email Address		

**Request for:**      Permanent Withdrawal      Leave of Absence      **Effective Date:**

**Reason for Withdrawal/Leave** (Check all that apply. *This information will be used for statistical purposes.*)

- Academic Difficulties (01)
- Employment (03)
- Financial (04)
- Medical (06)
- Military service (\*Must provide appropriate documentation) (11)
- Personal (10)
- Relocating closer to home/away from home (17)
- Seeking program not offered at Univ. of Scranton (18)
- Seeking program with more academic rigor (19)
- Social (16)

**Please provide additional details concerning your request below:**

**Are you transferring to another institution?**       Yes       No

If yes, transfer to:

**Note to Student:** Reduction in charges (tuition, room, board), if any, will follow the Schedule of Refunds as published in the current academic catalog. The withdrawal or leave is not official until the Dean's signature has been obtained and this form has been delivered to/processed by the Office of the Registrar and Academic Services.

Student Signature	Date
-------------------	------

Undergraduate Students Only: Director of Student Retention & Completion Review (submit to: registrar@scranton.edu)

Signature	Date
-----------	------

Student's Dean Authorization

Comments

Notification Date (Required)	Last Date of Attendance (Required)
------------------------------	------------------------------------

Signature	Date
-----------	------

**Return the completed form to the Office of the Registrar, O'Hara Hall, Second Floor.**

OR Office Use <input type="checkbox"/> SFAREGS - Drop Courses, Enrollment Status, Max Hours, Student Status <input type="checkbox"/> SHATCMT - Event Code, Date	SFSFAWDR - During Term Only <input type="checkbox"/> NSC <input type="checkbox"/> Email Notification <input type="checkbox"/> SGASTDN - LOA only	Signature	Date
---	---	-----------	------