



Undergraduate Course Drop or Withdrawal Request

THE UNIVERSITY OF TEXAS AT ARLINGTON

Semester/Term: _____ Year: 2 0 2 ____ Drop Deadline: www.uta.edu/acadcal

Student Name: _____ Student ID: _____

Major: _____ Email: _____ Phone: _____

COVID 19 Pandemic

Is this Drop/Withdrawal Request related to the COVID-19 Pandemic?

- Yes (advisor will place NDA service indicator)
 No

Requested Drop/Withdrawal

Please check the appropriate box for your request:

- Drop one or more classes but remain enrolled in at least one course (after Late Registration ends and before the Drop Deadline) - specify classes:

Course Prefix (eg. <u>MATH</u> in <u>MATH 1302-001</u>)	Course Number (eg. <u>1302</u> in <u>MATH 1302-001</u>)	Section Number (eg. <u>001</u> in <u>MATH 1302-001</u>)	Instructor's Signature IF REQUIRED BY YOUR ADVISING OFFICE

- Withdraw from all my classes before the end of the Late Registration period
 Withdraw from all my classes after the end of Late Registration and before the Drop Deadline

Student Responsibilities

- Please check this box to acknowledge that you have reviewed the below responsibilities:
- I am responsible for any remaining fees (library, lab, etc.) for the course(s) or tuition owed, based on the Texas Education Code refund schedule.
 - Student Accounts:* www.uta.edu/fees, Davis Hall 130, 817-272-2172, StudentAccounts@uta.edu
 - I understand that dropping courses could affect the current amount of financial aid that I receive as well as future eligibility for financial aid and scholarships. In some cases, dropping a course could result in my being required to pay back financial aid already received.
 - Financial Aid and Scholarships:* <http://www.uta.edu/fao/>, Davis Hall 252, 817-272-3561, fao@uta.edu
 - I understand that dropping a course may impact my Guaranteed Tuition Plan (if you have opted into this plan).
 - Guaranteed Tuition Information:* <https://www.uta.edu/admissions/afford/guaranteed-tuition>
 - I understand that, if I currently live in on-campus housing and/or have a meal plan, I may be required to immediately vacate my room or apartment if I am dropping all of my classes. If I am not in compliance with the minimum enrollment requirements of my contract or lease, then I will need to contact University Housing to request an exception. I understand that I may not be eligible for a refund of any housing and/or meal plan costs.
 - University Housing:* www.uta.edu/housing, 817-272-2791, University Center Main Level, housing@uta.edu

Academic Considerations

- Please check this box to acknowledge that you have reviewed the below academic considerations:
- I understand that dropping or withdrawing may delay my admission into a major and may ultimately delay my timely graduation.
 - I understand that I am responsible for knowing if the academic program(s) in which I am majoring limit the number of attempts I can make for a class.
 - University Catalog:* <https://catalog.uta.edu/>
 - I understand that I will earn a grade of W or Q when dropping or withdrawing after Census Date.
 - I understand that a grade of W or Q counts towards excessive hours.
 - Excessive Hours Information:* <http://www.uta.edu/records/courses/policies/excessive-hours.php>
 - I understand that, if I entered a Texas public college or university for the first time in Fall 2007 or thereafter, I may drop only 6 courses during my undergraduate career. Q grades do not count towards this limit.
 - Six Course Drop Limit Information:* <http://www.uta.edu/records/courses/policies/drop-limit.php>
 - I understand that, if I am classified as an international student, I must be enrolled in a minimum course load as specified by the Office of International Education.
 - Office of International Education:* <https://www.uta.edu/oie/>, 817-272-2355, Swift Center, international@uta.edu

Other Notes

- Parking Permit refunds: Parking and Transportation Services, <https://www.uta.edu/pats/>, 817-272-3907, Office and Classroom Building, parking@uta.edu
- Determine impact of dropping or withdrawing on your dependent status for the IRS and/or medical insurance.

Student's Signature: _____ Date: _____

Advisor's Signature: _____ Date: _____