



Office of the Registrar  
 Armitage Hall  
 Rutgers, The State University of New Jersey  
 311 North 5<sup>th</sup> Street  
 Camden, NJ 08102-6053

registrar.camden.rutgers.edu

Phone: 856-225-6053  
 Fax: 856-225-6453

## Notice of Withdrawal from the University

**STUDENT** *(To be completed in its entirety by the student)*

NAME: Last First MI *(please print)* RUID #

PERMANENT ADDRESS STREET

CITY STATE ZIP

EMAIL ADDRESS PHONE #

I WISH TO WITHDRAW FROM:  Fall 20\_\_  Spring 20\_\_  
 Summer 20\_\_  Winter 20\_\_

FOR THE FOLLOWING REASON(S): *(check all that apply and give as much detail as possible)*

- Personal  Financial  Medical  Academic  Transfer  
 Military  Work Conflict  Change of Major  Other

MUST EXPLAIN BRIEFLY:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Have you registered for next semester?  Yes  No  
 I intend to return in (tentative semester/year of re-enrollment):  
 Fall 20\_\_  Spring 20\_\_  Summer 20\_\_  Winterim 20\_\_  
 I do not intend to return. If transferring to another institution, please provide the name of that institution:

Are you receiving VA Benefits?  Yes  No  
 Are you an International Student with an F-1 or J-1 status?  Yes  No  
 Are you an EOF Program participant?  Yes  No

X  
 \_\_\_\_\_  
**STUDENT'S SIGNATURE** **DATE**

OFFICE OF THE REGISTRAR USE ONLY

\_\_\_\_\_  
 EFFECTIVE DATE

**(The effective date is the date the student signs this form as indicated below. This form is invalid unless presented to the Office of the Registrar within 72 hours of the student's signature.)**

\_\_\_\_\_  
 Processed by / Date

**ADMINISTRATIVE APPROVAL ONLY**

\_\_\_\_\_  
 Designated Advising Administrator Name *(please print)*  
 (please see list of Designated Administrator – second page)

\_\_\_\_\_  
 Designated Advising Administrator Signature Date

\_\_\_\_\_  
 Financial Aid Officer Name *(please print)*

\_\_\_\_\_  
 Financial Aid Officer Signature Date

\* International Student Services Name *(please print)*

\_\_\_\_\_  
 \*International Student Services Signature Date

\* EOF Counselor Name *(please print)*

\_\_\_\_\_  
 \* EOF Counselor Signature Date

*\*If Applicable.*

**Distribution: Student Accounts; Housing**

## Rutgers- Camden Withdrawal Instructions

**The *Notice of Withdrawal from the University Form* must be completed in its entirety before it will be processed.**

**STEP 1: Complete the left side of the first page.** Please provide as much detail as possible about your reason for withdrawal and your plans for return. If the withdraw is due to medical reasons or military deployment, please contact the Dean of Students, 856-225-6050.

**STEP 2: You must discuss this withdrawal with a designated advising administrator in your school.** That individual will review implications, address your questions, and then sign and date the form.

Designated Advising Administrators		
College/School/Program	Location/Contact	Phone
College of Arts & Sciences – Undergraduate	Office of Academic Advising, 215 N. 3 <sup>rd</sup> St, Suite 111	856-225-6043
College of Arts & Sciences – Graduate	3 <sup>rd</sup> Floor Dean’s Office, Armitage Hall	856-225-6149
School of Business – Undergraduate	Office of Academic Services, Business & Science Building, Second Floor	856-225-6216
School of Business – Graduate	Ms. Jorgelina Sime, BSB 2 <sup>nd</sup> Floor	856-225-6218
School of Law	Angela Baker, 217 N. 5 <sup>th</sup> Street, Room 609	856-225-2521
School of Nursing	Office of Nursing Student Success, Camden Nursing Building, 3 <sup>rd</sup> Floor	856-225-6281
University College (Off-Campus Programs) – Atlantic Cape	Jason Jankowski @ Atlantic Cape	609-837-2900, ext. 2912
University College (Off-Campus Programs) – Brookdale	Joe Walsh @ Brookdale	732-625-7012
University College (Off-Campus Programs) – Camden County	Yolanda Cosby @ Rutgers-Camden County	856-227-7200, ext. 4524
University College (Off-Campus Programs) – JBMDL	Christine Ulch @ JBMDL	609-353-1273
University College (Off-Campus Programs) – Mercer County	Katherine Birckmayer @ Mercer County	609-570-3419
University College (Off-Campus Programs) – Raritan Valley	Judith Grausso @ Raritan Valley	908-526-1200, ext. 8986

**STEP 3A: Visit your Financial Aid Officer in the One Stop Student Services Center (or call 856-225-6039 if you are in an off-campus program)** to discuss how the withdrawal will impact your current and future semester financial aid awards, grants, loans, and refunds, as well as your financial aid eligibility. The Financial Aid Officer will then sign and date your form.

- **STEP 3B:** If you are an *EOF Program participant*, please speak with Financial Aid first, and then your EOF Counselor located in the Center for Learning and Student Success in Armitage Hall Room 231, or call 856-225-6107 if you are in an off-campus program.
- **STEP 3C:** If you are an *International Student* with a J-1 or F-1 Visa type, please see Dean Atkins, The Center for International Programs, 215 N. 3<sup>rd</sup> Street, Suite 112 (1<sup>st</sup> floor), (856) 225-6832. You do NOT need to visit the Office of Financial Aid.

Implications for Fall and Spring Semester Complete Withdrawals		
Date	Grades/Transcript	Refund of Tuition and Fees
Prior to the beginning of the semester	No grades recorded	100%
1 <sup>st</sup> – 2 <sup>nd</sup> week of classes	No grades recorded	100%
3 <sup>rd</sup> – 4 <sup>th</sup> week of classes	Grades of W will be assigned	80%
5 <sup>th</sup> – 6 <sup>th</sup> week of classes	Grades of W will be assigned	60%
7 <sup>th</sup> – 8 <sup>th</sup> week of classes	Grades of W will be assigned	40%
9 <sup>th</sup> – 12 <sup>th</sup> week of classes	Grades of W will be assigned	0%
13 <sup>th</sup> week – end of the semester: Complete Withdrawals are not available during this time.	Letter grades earned.	0%

**STEP 4: Return the *Notice of Withdrawal from the University Form* to the One Stop Student Success Center on the 1<sup>st</sup> Floor of Armitage Hall within 24 hours.**