

## Health Documentation Guide

### For Health-Related Late or Retroactive Withdrawal Requests

#### Instructions

**For Student:** Give this guide to your healthcare provider(s) to inform them of the necessary policy and supporting documentation requirements for health-related Late or Retroactive Withdrawal requests. Once your healthcare provider has supplied the required letter and information, attach the documentation to your Late/Retroactive Withdrawal request form.

**For Healthcare Provider:** Please use the outline below to supply supporting information and documentation substantiating the student's request for a Late or Retroactive Withdrawal.

**Important:** Late or Retroactive Withdrawal requests are granted only for serious extenuating circumstances, defined as **unforeseen, uncontrollable, and unavoidable** events that prevent a student from completing academic responsibilities (i.e., class attendance, ability to do homework, etc.) within a given academic term.

#### Letter Requirements

This information should be submitted on **official letterhead** by a licensed/certified healthcare provider in the area of diagnosis and include the following details:

1. Student's full name and date of birth
2. Date of document
3. Health provider name, title, and organization
4. Diagnosis and/or description of the problem
5. Specific period of onset and duration (with dates)
6. Degree of functional limitations affecting the student's academic responsibilities
7. Your recommendation regarding the appropriateness of a Late or Retroactive Withdrawal\* for the specified withdrawal term (include term and year).

*\*Late or Retroactive withdrawals for extenuating circumstances should meet the criteria of unforeseen, unavoidable, and uncontrollable events that have resulted in a student's inability to complete academic responsibilities within a given academic term.*