



STUDENT WITHDRAWAL - MEDICAL DISCOUNT APPLICATION

STUDENT INFORMATION

Student Name: _____ Student ID Number: _____

Student Address: _____

City, State, Zip: _____ Telephone Number: _____

STATEMENT OF PHYSICIAN OR PRACTITIONER

Medical Facts Regarding Patient's Condition: _____

Date condition commenced: _____ Probable duration of condition: _____

Last day attended school: _____ Date expected to return to school: _____

Is (or was) patient incapacitated (unable to attend school, or perform regular daily activities)? YES NO (circle one)

Please provide dates of incapacity: _____

If patient remains incapacitated, how long is incapacitation expected to last? _____

If the patient's condition is of a chronic nature, please describe likely frequency and duration of periods of incapacity: _____

Regimen of treatment to be prescribed: Indicate number of visits, general nature and duration of treatment, including referral to other provider of health services. Include schedule of visits or treatment if it is medically necessary for the patient to be off work or school on an intermittent basis or to work or attend school less than the student's normal schedule of hours per day or days per week

By physician or practitioner: _____

By another provider of health services: _____

PHYSICIAN OR PRACTITIONER INFORMATION

Comments: _____

Physician Name: _____ License No: _____

Address: _____

Telephone: _____ Field of Specialty _____

Physician Signature: _____ Date: _____

BUSINESS USE ONLY

Financial Aid _____ **Dean for Academic Affairs** _____

Business Office _____ **Date Sent** _____ **Date Received** _____

Medical Withdrawal Policy

A student who has missed or anticipates missing two consecutive weeks of classes due to physical, mental, or emotional illness is eligible to pursue a medical withdrawal from the university. The student must contact the Associate Dean of Academic Affairs to request permission for a medical withdrawal, and must provide satisfactory documentation from her treating physician. If the documentation is deemed inadequate, the student may be requested to provide additional documentation. If granted a medical withdrawal, the student will receive a grade of “W” at any point during the semester. Final approval of the withdrawal will be made by the Associate Dean of Academic Affairs in conference with the necessary university personnel.

If a student is approved for a medical withdrawal, she may also be eligible for a medical withdrawal tuition credit. The student is requested to contact the Business Office and the Office of Financial Aid to determine how her financial aid will be affected, and the actual credit for which she will be entitled. The following guidelines will be used in determining the credit that the student may be entitled to receive:

Tuition Credit Guideline

(Based on a 16-week semester; other terms will be prorated)

WEEKS	0	through	1	100%	Credit (Tuition Only)
WEEKS	2	through	4	75%	Credit (Tuition Only)
WEEKS	5	through	8	50%	Credit (Tuition Only)
WEEKS	9	through	12	25%	Credit (Tuition Only)
WEEKS	13	through	16	0%	Credit (Tuition Only)

A medical withdrawal credit is a non-cash allowance, and will be determined based upon the specific financial aid situation of each student. If a student approved for a medical withdrawal credit has a current balance, any tuition credit will be applied to the current semester. If the account has a zero balance, the tuition credit is given for a subsequent semester. The tuition credit must be used within one year.

Tuition deposit, book charges, and fees are not eligible for a medical withdrawal credit.

Reinstatement after a Medical Withdrawal

A student who has taken a medical withdrawal may be required to provide a medical release in order to be reinstated as a student at Mount Mary University on a full or part-time basis.