Undergraduate Withdrawal/Leave of Absence

Important: Withdrawing from the university can affect the amount of financial aid received. If you are a current financial aid recipient, please check with your financial aid counselor before finalizing your withdrawal.

Please complete this form and bring it to your Dean’s Office for approval.

Dean’s Office Addresses:

- Boston College
  - Office of the Dean
  - Lynch School of Education
  - Campion Hall 101
  - Chestnut Hill, MA 02467

- Boston College
  - Office of the Associate Dean
  - Carroll School of Management
  - Fulton Hall 315
  - Chestnut Hill, MA 02467

- Boston College
  - Office of the Undergraduate Dean
  - Connell School of Nursing
  - Maloney Hall 217
  - Chestnut Hill, MA 02467

- Boston College
  - Office of the Associate Deans
  - Morissey College of Arts and Sciences
  - Stokes Hall S132
  - Chestnut Hill, MA 02467

- Boston College
  - Office of the Undergraduate Dean
  - Woods College of Advancing Studies
  - St. Mary’s Hall South, Ground Floor
  - Chestnut Hill, MA 02467

Name __________________________ Eagle ID Number ____________

Last   First   M.I.

Permanent Address

__________________________ __________________________

Home Telephone ( ) __________________________

Local Address

__________________________ __________________________

Local Telephone ( ) __________________________

• Have you ever received Financial Aid?  yes  no

• Have you ever been assigned BC Housing?  yes  no

• Degree Program (e.g., BS, BA, etc.) and major:

• Expected Graduation Date: __________________________

• Will you complete the present semester?  yes  no

• What was or will be the last date you attend classes at BC?

    Month / Day / Year

Please indicate whether you are taking a leave of absence, transferring to another school, or withdrawing (check one):

☐ Leave of Absence  Reason __________________________

When do you plan to return? (circle one)  Fall  Spring  20 __________

(NB: No academic work taken during your leave will be credited towards your degree unless specifically authorized in advance by your Dean. You should apply for readmission through the Office of Student Services in Lyons Hall at least six weeks before the semester in which you plan to return; all applicants for readmission must be cleared by an Associate Dean.)

☐ Transfer to  ☐ Woods College of Advancing Studies

Do you plan to complete your degree in the Woods College?  yes  no  If not, when do you plan to return to the day school? (circle one)  Fall  Spring  20 __________

(NB: Readmission approval of your Dean is required.)

☐ Withdrawal  Reason __________________________

(Leaving BC permanently)

Student’s Signature __________________________ Date __________

DO NOT WRITE BELOW THIS LINE

Dean’s Authorization __________________________ Date __________

Conditions for readmission:

FOR STUDENT SERVICES’ USE ONLY

Effective term __________________________ Withdrawal Date __________________________ Transaction Week __________________________

Status __________________________ Date Processed __________________________

Authorizing Signature __________________________