



I _____ (name) applied for and received a medical /
compassionate withdrawal from the _____ term.

I understand that I was granted this exception to the policy because I was faced with
an unforeseen circumstance which impacted my ability to be successful in school.
Since that time, I have done the following to ensure that my return to school will be
successful.

I further understand that an additional medical / compassionate withdrawal will not be
provided to me if I am unsuccessful in this term of studies and confirm that I am fully
prepared to commit to my studies once again.

Student Signature

Date