



East Georgia State College
 Office of the Registrar
 131 College Circle
 Swainsboro, GA 30401
 Tel: (478)289-2014 Fax (478)- 289-2353

Request for Hardship Withdrawal

Consult, where and when possible, with the academic advisor and instructors to understand the impact of the hardship withdrawal on their academic progress and to ensure that there are no other options, such as an “incomplete” available. Students who are near the end of the term might be better advised to seek an “incomplete.”

Consult, where and when possible, with the Student Affairs financial aid counselor prior to initiating a hardship withdrawal to ensure that SAP and financial aid eligibility is not impacted.

If a resident student, consult with the Director of Housing to understand the impact of the hardship withdrawal on the student’s current and future semester’s housing obligations. A hardship withdrawal granted under this policy may result in a waiver of housing cancellation fees.

File the Hardship Withdrawal petition on a timely basis. This should be done as soon as possible after the student becomes aware that they are unable to continue due to non-academic reasons beyond their control.

Students who know prior to the Last Day to Drop Without Academic Penalty that they have a hardship that may prevent continuing progress in classes are best advised to follow the procedures above to withdraw from one or more of their courses.

Students who file for Hardship Withdrawal after the Last Day to Withdraw Without Academic Penalty must document continuing hardship circumstances in the period after the Last Day to Withdraw Without Academic Penalty in order to qualify for consideration.

Complete the "Request for Hardship Withdrawal" form found on the [Registrar’s Website](#)

Submit the request and all supporting documentation to the Office of the Vice President for Academic and Student Affairs

See full EGSC withdrawal policy [here](#)

Financial Aid Student: Yes No **VA Student:** Yes No **Housing Student:** Yes No **Athlete** Yes No

EGCS Campus: Swainsboro Statesboro Augusta Online **Term:** _____

Student Name: _____ **Student ID#:** _____ **Phone:** _____
Last First M.I.

Mailing Address:

Street City State Zip Code

Reason: Physical Medical Personal Other (specify below)

Hardship Withdrawal Requests must be received prior to the last day of class for the term in question. Please see the academic calendar for specific dates. A student who knows that they are in such extreme circumstances that they cannot complete the term should file the Hardship Withdrawal Petition as soon as possible prior to the end of classes for the term in question.

Student Signature: _____ **Date:** _____

For office use only:

<input type="checkbox"/> Approved	<input type="checkbox"/> Not Approved
_____ Signature of the VPASA	_____ Dates