

REQUEST TO WITHDRAW

See Article 6.9 of the Graduate School Policy Handbook for Guidelines.
Submit form to Graduate School – N204



THE GRADUATE SCHOOL OF
BIOMEDICAL SCIENCES

BAYLOR COLLEGE OF
MEDICINE

Student Name: _____ BCM ID #: _____

Graduate Program: _____ (Are you also in the MD/PhD Program? Yes No)

This form must be submitted prior to the effective date of withdrawal.

EFFECTIVE DATE OF WITHDRAWAL: _____

REASON:

Student's Signature: _____

Date Signed: _____

Forwarding Address: _____

Telephone:
(____) _____

Non-BCM email address _____

REQUIRED APPROVALS

(Department administrators must obtain approval from the GSBS prior to entering any HR actions for graduate students)

DEPARTMENT ADMINISTRATOR: _____
SIGNATURE DATE PRINTED NAME

PROGRAM ADMINISTRATOR _____
SIGNATURE DATE

MAJOR ADVISOR: _____
SIGNATURE DATE

PROGRAM DIRECTOR: _____
SIGNATURE DATE

GRADUATE SCHOOL DEAN: _____
SIGNATURE DATE

(OVER)

**WITHDRAWAL CLEARANCE PROCESS
REQUIRED BY BAYLOR COLLEGE OF MEDICINE**

STUDENT WITHDRAWING: _____ BCM ID #: _____

WITHDRAWAL DATE: _____

♦ FINAL TRANSCRIPT HAS BEEN REVIEWED AND APPROVED, WITH EXCEPTIONS NOTED ON TRANSCRIPT:

Student's Signature Date

♦ WITHDRAWAL FORM HAS BEEN REVIEWED AND APPROVED BY THE GRADUATE SCHOOL AND THE STUDENT MAY PROCEED WITH THE CLEARANCE PROCESS.

Graduate School Date

SIGNATURES BELOW INDICATE DESIGNATED RESPONSIBILITIES HAVE BEEN MET

SIGNATURES MUST BE OBTAINED IN THIS ORDER	Signature	Date
<p><u>Benefits (Student Health Insurance)</u> Insurance coverage terminates the last day of the month in which a student graduates or withdraws. Although BCM does not endorse any particular health insurance company, the following are possible resources for purchasing an individual policy: Ehealth Insurance, Government Marketplace or Wortham Insurance</p> <p style="background-color: yellow; color: red; text-align: center;">Student's signature acknowledges receipt of this information</p> <p style="text-align: center;">X</p>	No signature required from Benefits.	
<p>International Services Office – O'Quinn Medical Tower, 6624 Fannin, Suite 1800 InternationalServicesTeam@bcm.edu <i>Required for non-U.S. citizens including U.S. permanent residents</i></p>		
<p>Student Financial Aid - 415A financialaid@bcm.edu 713-798-4603 M-Th 8am-5pm Fr 8am-4pm</p> <p><input type="checkbox"/> Federal Loan Exit Counseling www.studentloans.gov</p>		
<p>Student Account Services – O'QUINN TOWER Email form to sas@bcm.edu for signature</p> <p><input type="checkbox"/> Federal Loan Exit Counseling <input type="checkbox"/> Account Paid in Full</p>		
<p>TMC Library <i>Account is closed if student is leaving Baylor. If remaining at Baylor as a Postdoc, account is changed accordingly. ras.check@library.tmc.edu</i></p>		
<p>Security – BCM 108H <i>ID badge turned in here.</i></p>		

COMPLETED FORM MUST BE RETURNED TO THE GRADUATE SCHOOL OFFICE BY THE STUDENT