LINCOLN MEMORIAL UNIVERSITY
WITHDRAWAL FORM UG/GR

Name: _____ Term: _____

I.D. #: _____ Birth Date: _____ Student Support Services: Y N

Permanent Address: _____
Street/Box/Route City State Zip

Site: _____ Residence Hall: _____ Room: _____ Phone: ( ) _____

Residential students must check out of the residence halls within 24 hours of withdrawing from the University.

Hours currently enrolled: _____ Major: _____ Class: _____
Fr, So, Jr, Sr, Grad

Reason for Withdrawal: _____

Do you currently have insurance coverage under the LMU sponsored United Health Care Plan? YES NO
If yes, have you used the insurance plan to cover any medical expenses this academic year? YES NO
** Do you wish to keep your coverage until the end of this academic year? YES NO
** The insurance premium can only be refunded if you withdraw within the first 30 days of the academic term, and you h
For questions regarding Insurance, please contact 423-869-6336

When a student officially drops all courses/withdraws from the University, courses will be graded on the transcript with a **WD** as of the first day of the term. A grade of a WD does not affect the **LMU** GPA. (For Tennessee Lottery recipients please contact the Financial Aid Office at 423-869-6336.) Subject to the deadlines on the academic calendar, courses may be graded with an **F.**
A Withdrawal does not waive the student's financial responsibility to the University. Due to the Withdrawal process, the amount of balance due or credit (refund) may not be reflected until all of the student's financial adjustments have been posted. If a student receives 100% refund of charges for the semester, their financial aid for the semester will be cancelled. For amounts owed, please contact the Dir. of Student Accounts at 423-869-6451 to set up a repayment agreement to avoid additional charges.

*****By signing below, I verify that I have read the information above and want to withdraw from LMU for the specified term.*****

Student's Signature: _____ Date: _____

Signatures Required			Student Accounts Office Use Only			
Check Out Points	Signature	Date	Fees	Original Charge	Percent Credit	Credit Amount
Admissions (If Veteran or International Student)			Tuition			
Appropriate Sch. Dean or Program Director			Room			
Residential Life			Meals			
Student Accounts			Comp Fee			
Financial Aid			Vehicle			
Student Services			Other			
Registrar			Total Credit			$
Official Date of Withdrawal _____			Total Amount Due LMU (Pending Final Clearance)			$

White: Registrar

10/2022