Date the withdrawal/change is to be effective: __________________________ mm/dd/yyyy

Date you plan to return to the University of Richmond campus: __________________________ mm/yyyy

Financial Acknowledgement
In withdrawing from or terminating my study abroad program before the scheduled ending date, I acknowledge that I am liable for all costs associated with my study abroad program and agree to pay the University of Richmond and the host institution all such costs that may include, but may not be limited to, UR administrative fees, tuition, room, board, health insurance, orientation and language program costs, excursions, international transportation, financial aid and/or scholarship payments, and all other costs deemed relevant and applicable by the Dean of International Education and/or University of Richmond. I furthermore acknowledge that in some instances the total of these costs may greatly exceed the fees paid to Richmond typically charged for one term of study abroad.

Insurance Acknowledgement
I understand that my ACE/AXA insurance policy will be cancelled upon my return to the United States or my home country. If I am not returning to the United States or my home country and remain abroad, I understand that my abroad insurance will be cancelled effective on the withdrawal date and that I am responsible for purchasing insurance valid outside of my home country.

Housing Acknowledgement
In terminating my study abroad program prior the scheduled ending date, I understand that it is unlikely that I will be housed on campus if I desire to return to campus during the semester that I was scheduled to be abroad. If I am permitted to return to campus during the semester I was scheduled to be abroad, I understand that it is my responsibility to contact the UR Housing Office or make off-campus housing arrangements. The University of Richmond cannot provide assistance with off-campus housing.

Academic Acknowledgement – Withdrawn students only
In withdrawing from my study abroad program before the scheduled ending date, I understand that University of Richmond credit is available only for those courses at the foreign university which I have completed and in which I have earned an equivalent grade of “C” or higher in the local grading system that are officially transcripted and mailed to University of Richmond.

Withdrawal for medical reasons
If you withdraw from your program for medical reasons, you must provide an official note from a certified physician that for medical reasons it is not advisable for you to go abroad. This note cannot be from a family member.

Reasons for Change of Program or Withdrawal
Please state below why you have decided to change study abroad program or withdraw from your program early. This information will be kept confidential and will help us to provide better services to our students. Please contact your respective Dean’s office (RC or WH) for re-admission procedures, including housing and registration, for the semester you plan to return to Richmond.

Signature: ___________________________ Today’s Date: ___________________________
Printed Name: ___________________________ UR ID Number: ___________________________
Study Abroad Program: ___________________________ Country: ___________________________