OFFICE OF INTERNATIONAL EDUCATION  
Email: studyabroad@richmond.edu

Semester Abroad Withdrawal or Change Form

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Academic Acknowledgement for Withdrawn students only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

Withdrawal for medical reasons
An official note from a physician (who is not a family member) stating that, for medical reasons, it is not advisable for me to go or to continue to study abroad must be provided to my study abroad advisor at Richmond. This note may be faxed to 1-804-289-8904.

Why am I changing or withdrawing from this program?
Please state below why you have decided to change study abroad program or withdraw from your program. This information will be kept confidential. Please contact your respective Dean’s office (RC or WH) for re-admission deadlines, 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: ____________________________
Date the withdrawal/change is to be effective: ____________________________  mm/dd/yyyy
Date you plan to return to the University of Richmond campus: ____________________________  OR  ☐ Not returning to UR

mm/yyyy

June 2019