

MEDICAL/MENTAL HEALTH WITHDRAWAL GUIDE FOR STUDENTS

Counseling Services and Student Health Services has been asked by Academic Support and Undergraduate Studies, Dean of Graduate Studies, Business Office, Registrar's Office, and Financial Aid to help process student's requests for withdrawals due to a medical/mental health problem. Please use this document as a guide to assist you with the completion of your Medical/Mental Health Withdrawal.

You are responsible for your academic performance until the date that your Medical or Mental Health Withdrawal is approved. The first step should be to speak with your professor as she/he may be able to help you.

Any refund of tuition and fees will follow the University's Refund Policy for Withdrawal or Dropping Courses (see page 57 of *UTSA bulletin*) at the time of the effective date of the withdrawal. The effective date of the withdrawal will be determined by the M/MH Committee.

Your Responsibilities: You are required to request and ensure that **all** of the following documentation is submitted in a timely fashion:

1. **Authorization To Release Records For Medical/Mental Health Withdrawal Request** - This document allows UTSA Wellbeing Services permission to act on your behalf with Academic Support and Undergraduate Studies, Dean of Graduate Studies, Business Office, the Registrar's Office, and Financial Aid.
2. **Authorization To Release Information For Medical/Mental Health Withdrawal Request** - This document enables the UTSA Wellbeing Services to contact and/or accept corroborating documentation from your doctor, provider, therapist, etc. for the purpose of your Medical/Mental Health Withdrawal.
3. **Informed Consent: Medical/Mental Health Withdrawal Requests** - This document provides explanations of confidentiality, maintenance of records, services offered, and emergency/after-hours resources.
4. **Personal Statement** - A **typewritten** statement by you with an explanation of **why** you are requesting a medical or mental health withdrawal. Please include the dates of when this problem/concern began. Please be as descriptive as possible regarding the severity of your condition (i.e. how your problem affected your ability to complete the semester in question).
5. **Provider's Statement** - A statement on **letterhead** from your attending health care provider (i.e. physician, therapist, psychiatrist, psychologist, etc.) to include dates of onset, problem description, diagnosis, plan of treatment, prognosis, and his/her recommendation for withdrawal. If your mental health withdraw request is in regards to a recent death, a copy of the death certificate will be required.
6. **Transcript** - A current transcript (i.e. can be an *unofficial* copy) with the **final grades** earned during the semester in which you are applying for the Medical or Mental Health Withdrawal. Transcripts can be requested by accessing the Registrar's Office online at <http://www.utsa.edu/registrar/>
7. **Optional** - Any supporting documentation to verify the validity of your concern/problem (e.g. hospital records, police report, emergency department summary, court records, etc.).

UTSA Wellbeing Services Role in the Mental Health Withdrawal Process:

Our role is to collect, review, and verify the documentation that you submit supports your request for a Medical or Mental Health Withdrawal. UTSA Wellbeing Services will maintain the privacy of your documents throughout this review process. UTSA Wellbeing Services will submit a recommendation to the M/MH Committee after all the documentation has been received and verified. The M/MH Committee will make the final decision regarding each student's Medical or Mental Health Withdrawal request. Any questions regarding Mental Health/Medical Withdrawals should be directed to UTSA Wellbeing Services at 210-458-4589 Thank you.

