DOCUMENTS OF THE GENERAL FACULTY

EDUCATIONAL POLICY COMMITTEE PROPOSAL TO CHANGE THE RETROACTIVE WITHDRAWAL POLICY IN THE GENERAL INFORMATION CATALOG

On behalf of the Educational Policy Committee, Randy Bomer (committee chair and professor, curriculum and instruction) submitted the following proposal with rationale to change the retroactive withdrawal policy in the *General Information Catalog*. The secretary has classified this as legislation of *general* interest to more than one college or school. It will be considered by the Faculty Council at its meeting on April 11, 2016.

Hillary Hart, Secretary

General Faculty and Faculty Council

EDUCATIONAL POLICY COMMITTEE PROPOSAL TO CHANGE THE RETROACTIVE WITHDRAWAL POLICY IN THE GENERAL INFORMATION CATALOG

Background and Rationale

Usually a student who wishes to leave the University for non-academic reasons is expected to withdraw by the last class day of the current semester. A retroactive withdrawal occurs when a student withdraws from the University after the semester in question has concluded and grades have been reported. Because they change the existing academic record (e.g., erasing failing grades), retroactive withdrawals are to be used in only rare circumstances, for compelling reasons. This is particularly true when the request is for a semester well passed the just-completed term (e.g., two years ago). In those instances, approval comes directly from the college dean (or, if Faculty Council approves a new policy, the appropriate associate dean).

Several years ago, a number of student deans and others who work directly with students (e.g., at the health center) came together to address a concern that colleges approved retroactive withdrawals at starkly different rates, with use and approvals in some colleges far exceeding rates in others. To create more consistency, legislation went to EPC and Faculty Council to tighten rules for granting these withdrawals. Current GIC language informs students that withdrawals are granted only if "the student was somehow unable to withdrawal by [the last day]." The standard, in essence, looks at capacity, particularly whether someone was physically incapable of withdrawing (e.g., was in a coma during the end of the semester and no one petitioned on the student's behalf to withdraw). The effect has been clear: There is far more consistency in use of these withdrawals across colleges. At the same time, rates of granting these withdrawals are low, and it is clear from the data and from reports on the ground that the standard makes retroactive withdrawals exceedingly hard to obtain. There is now a new consensus among student deans, as well as requests from those who work with students coping with trauma or other crises, that existing policy is too restrictive. For example, a student might experience a traumatic event but not clearly recognize the effects of the trauma on his or her functioning until after a semester concludes. Currently students who meet with academic advisors and discuss such events during a semester are encouraged to withdraw before the semester ends in order to focus on dealing with the events; however, not all students experiencing a crisis know to speak with someone or recognize that they should do so.

The following wording changes from the Policy Implementation Group are designed to maintain a strict policy that reflects the fact that these are to be granted in only rare circumstances while also permitting more flexibility and adaptability as cases demand. Rather than restricting withdrawals based on the absence of physical capacity, the proposed new policy introduces the well-known legal concept of "reasonableness" into the decision making process, as well as asking decision makers to consider if circumstances were "compelling." This should permit retroactive withdrawals to be approved when they are in the best interest of the student and the University while also conveying that circumstances warranting approval are highly limited.

GIC policy also contains a paragraph informing students (or others) about the procedures for retroactive withdrawals, which are initiated and handled through the dean's office in each college. GIC language informs students that they must secure "sufficient and compelling" documentation and reminds people that the experienced staff at University Health Services and the Counseling and Mental Health Center is one source of documentation for students (see second paragraph below; UHS and CMHC are highly knowledgeable about UT practices concerning these withdrawals). Because some students seek care from off-campus entities, new proposed GIC language also adds a clause about documentation into the first paragraph to remind students that mental or physical health problems (the most common reason for these withdrawal requests) must be

documented "by an appropriate healthcare professional"; this emphasizes that any given professionals' training/specialty must be relevant for the assessment.¹

Retroactive Withdrawal (new language underlined below)

Retroactive withdrawal. A student who wishes to leave the University for nonacademic reasons is expected to withdraw by the last class day of the current semester as described above. Requests to withdraw after the last class day are considered only if the student was somehow unable to withdraw by that day. Requests to withdraw after the last class day are considered only if there were compelling circumstances that reasonably prevented the student from withdrawing by that day. For example, students who were hospitalized or incarcerated, called away at the end of the semester because of a family crisis, asked to perform military service, or seriously debilitated by mental illness may be unable to withdraw by the last class day of the semester in which they are enrolled. Students considered under this standard may include, but are not limited to, students who were hospitalized or incarcerated, called away at the end of the semester because of a family crisis, asked to perform military service, or experienced a mental or physical health problem, documented by an appropriate healthcare professional, that seriously inhibited their mental or physical functioning.

In these cases, students may discuss the situation with the dean or an academic advisor in the dean's office. If there is sufficient and compelling documentation, and if the request for retroactive withdrawal is submitted to the dean's office before the end of the next long-session semester, the dean or the dean's staff will review the request and consider approval of a retroactive withdrawal. Appropriate documentation could include written recommendations from University Health Services and the Counseling and Mental Health Center.

A college or school may approve an appeal for retroactive withdrawal for a semester prior to the previous long semester, but only for the most compelling nonacademic reasons. If approved, the appeal must be signed by the dean of the college/school.²

¹ The Policy Implementation Group has been asked to consider whether even more specific language on documentation is desirable (e.g., to explain in more detail what documents will need to be gathered). We feel that Colleges are in the best position to decide what evidence is needed in a particular case and would not want to see greater specificity reduce documentary options. The staff and deans who deal with these cases may face fairly complicated fact patterns and, in some instances, sensitive matters. They are in a better position to judge what exact documents are necessary.

² Please note that a separate policy proposal asks that the permitted signatory be expanded to include associate deans who typically know the case-specific facts of such requests better than the college's dean.