



# Release to Return to the University Following Medical Withdrawal

University of Southern Indiana  
Administrative Appeals Committee Administrative Assistant  
Health Professions Center, HP 2023  
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### **Returning to the University:**

Students approved for a medical withdrawal will have a hold placed on their record to prevent registration for future terms until the student has been released from the terminally degreed licensed healthcare provider (Doctor, Psychologist, etc.) to return to the University. The terminally degreed licensed healthcare provider treating the student while on leave must complete this form verifying that the student's condition has improved to the point where it is medically appropriate for the student to return to the University and enroll in a course of study. In certain cases, students returning from a medical withdrawal will also be asked to meet with Dean of Students Office to ensure that there is adequate support as they transition back to USI.

### **To be completed by the student:**

Student name: \_\_\_\_\_

Student ID number: \_\_\_\_\_

Semester/Term returning to the University: \_\_\_\_\_

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### **To be completed by the terminally degreed licensed healthcare provider:**

Full Name (please print): \_\_\_\_\_

Type of practice/Medical specialty: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Date of student's/patient's most recent visit: \_\_\_\_\_

Please acknowledge the following statement by signing below:

I verify that I have examined the student/patient named above on the date indicated above and have determined that his/her medical condition has improved to the point where it is medically/psychologically appropriate for the student to return to USI and enroll in a course of study. I certify that all information provided is true, correct, and without personal bias.

\_\_\_\_\_  
Terminally Degreed Licensed Healthcare Provider Signature

\_\_\_\_\_  
Date