

Request to Withdraw

COMPLETING THIS FORM MEANS YOU ARE WITHDRAWING FROM ALL COURSES FOR WHICH YOU ARE ENROLLED.

INSTRUCTIONS

1. Student must complete form. Failure to follow this procedure may result in a grade of "F" being assigned for each course for which the student is registered. **Failure to attend class does not constitute a withdrawal.**
2. Submit completed form to the Office of Admissions and Records.

PLEASE NOTE: The date this form is received in the Office of Admissions and Records will be the effective date for calculating any refunds. The refund dates and drop/add/withdrawal dates are published in the semester Schedule of Classes.

Personal Information (Please print)

Semester	Year	Student ID #	Date of Birth
Last Name		First Name	Middle Name
Street/Route/Box Number		Apartment No.	
City	State	Zip	() Telephone Number

Please check the box beside the reason(s) you are withdrawing:

- Personal
- Financial
- Work
- Illness
- Other _____

TO BE COMPLETED BY STUDENT – Please list all classes for which you are currently enrolled.

	<u>Course No./Section No.</u>	<u>Name of Course</u>
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____

Student's Signature _____

Date _____