

NOTICE OF WITHDRAWAL FORM

1. Please print
2. For use to withdrawal from the University or an individual course. If this is your last course, then use the Withdrawal from the University.
3. Form must include all signatures
4. This form must be processed in the Office of the University Registrar -- 130 Jesse Hall to be **official**. **Filing this form with your Academic Advising Unit does not complete the process.**
5. Faculty members will assign a grade for W or F, whichever is appropriate

Student Name: _____

Student Number: _____ Term: _____

Date Student Notified Academic Unit: _____

Career: *Must use a separate form for **each** career.

	Ugrd		Vet Med		Law
	Grad		Med		

Withdrawal from a Course Term/Year: Spring _____ Summer _____ Fall _____

NOTE: USE ONE FORM PER TERM AND INDICATE IF THE COURSE IS A REGULAR SESSION, PART OF TERM OR CDIS.

COURSE NAME	SUBJECT AREA	CLASS NUMBER	COURSE NUMBER	CREDIT HOURS	GRADE

Withdrawal from the University Term/Year: Spring _____ Summer _____ Fall _____ **NOTE: USE ONE FORM PER TERM**

Note: If you are enrolled in any Center for Distance & Independent Study Courses (CDIS) and would like to withdraw from the course, please list below. If you are in a part of term course (8-weeks, 4 weeks, intersession etc.), please list below.

COURSE NAME	COURSE NUMBER

_____ is withdrawing from the University for the following reason as of the following date _____.

Reason: _____

If you receive Financial Aid or live in University housing, please make sure you also contact these departments.

Student Signature _____ Date _____

Print name of approving individual _____

Approved Academic Advising Unit _____

(Dean's Signature Stamp)

Signature of approving individual _____

Date _____