

*Semester:* \_\_\_\_\_ *Year:* \_\_\_\_\_  
 \_\_\_\_\_ **Fall**            20\_\_\_\_  
 \_\_\_\_\_ **Spring**        20\_\_\_\_  
 \_\_\_\_\_ **Summer**       20\_\_\_\_



**Withdrawal From College Form**

**Student Name:** \_\_\_\_\_

**Student ID#:** \_\_\_\_\_

**Major:** \_\_\_\_\_

**Date of Withdrawal:** \_\_\_\_\_

**Expected Return Date:** \_\_\_\_\_ *Semester:* \_\_\_\_\_ *Year:* \_\_\_\_\_

**Reason For Withdrawal**

Ineligible for Financial Aid _____	Financial Problems _____	Medical _____
Family Responsibilities _____	Employment _____	Military _____
Other (Please elaborate) _____	Childcare _____	Administrative _____

**Comments/Referrals**

**Courses To Be Dropped:**

CRN _____ Course Prefix/# _____ Sec. No. _____ Hrs. _____	CRN _____ Course Prefix/# _____ Sec. No. _____ Hrs. _____
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CRN _____ Course Prefix/# _____ Sec. No. _____ Hrs. _____	CRN _____ Course Prefix/# _____ Sec. No. _____ Hrs. _____

**Student's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Registrar's Office Staff:** \_\_\_\_\_

**Date:** \_\_\_\_\_