



<u>NOTIFICATION OF WITHDRAWAL</u>					<u>FOR OFFICE USE ONLY</u>	
Student must complete this form for complete withdrawal from the semester. The signatures at the right must be secured by the student.					<u>EFFECTIVE DATE*</u> *The effective date will be the date approved by the Dean.	
LAST NAME			FIRST		M.I.	
					Date Received by Registrar:	
					<u>DEAN'S SIGNATURE & DATE</u>	
					X _____	
					Dean's Date:	
					<u>FINANCIAL AID OFFICER'S SIGNATURE & DATE</u> <small>(Required if you are receiving Financial Aid)</small>	
					X _____	
					<u>HOUSING OFFICER'S SIGNATURE & DATE</u> <small>(Required if you live in Univ. Housing)</small>	
					X _____	
					<u>INTERNATIONAL STUDENT & SCHOLAR SERVICES SIGNATURE & DATE</u> <small>(Required if you are enrolled with F1 or J1 Visa)</small>	
					X _____	
					<u>STUDENT ACCOUNTING SIGNATURE & DATE</u>	
					X _____	
<u>TO THE REGISTRAR:</u>						
I wish to withdraw from: _____						
			<small>College</small>		<small>Year Semester</small>	
for the following reasons (select one from menu):						
Explain briefly: _____						
<u>I MAY BE CONTACTED AT:</u>						
<small>Street Number</small>		<small>Apt.</small>		<small>City</small>		<small>State</small>
						<small>Zip Code</small>
<small>Telephone Number</small>		<small>Cell Number</small>		<small>Email Address</small>		
STUDENT'S SIGNATURE					Date	
FORMS ARE TO BE DISTRIBUTED BY THE REGISTRAR AND/OR APPROPRIATE DEANS' OFFICES						