

COURSE WITHDRAWAL FORM

Student's Name : _____

ID Number: _____ Major : _____

I would like to withdraw from course:

Professor

Check appropriate box:

Academic year...../..... Semester: Fall Spring Summer

.....
Date

.....
Student's Signature

Last day of student's attendance:

Comments of Student's Advisor:	Signature of Student's Advisor:
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- 1) A student may withdraw from a course for any reason during the Official Course Withdrawal period. (As published in the Academic Calendar)
- 2) Prior to completing a course withdrawal form students must obtain a signature from their Student Advisor.
- 3) Course Withdrawal forms submitted with unauthorized signatures will not be processed and may result in an "F" for the course and disciplinary action.
- 4) Withdrawals from a course after the published deadline will not be approved and the student must continue to attend the course, completing all assignments. A student who stops attending class without following the above procedures will receive an "F" in the course.
- 5) A "W" will be recorded on the transcript for approved course withdrawals, this does not affect student's GPA.
- 6) No course fees will be refunded for withdrawn courses, student's who choose to repeat a withdrawn course must pay the repeat course fee.

For Registrar's use only	Received by:	Received on:	Entered DB:
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