**OFFICE OF THE REGISTRAR**

**RECORDS AND REGISTRATION**

**Withdrawal Authorization**

Revised 3/2014

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**Step One:** To be completed by the Student

<table>
<thead>
<tr>
<th>Name:</th>
<th>Date:</th>
</tr>
</thead>
</table>

**Request:**  
- ☐ Withdrawal from __________ term  
- ☐ Withdrawal from ________ program

I ✗ will OR ✗ will not complete the current term.

You remain responsible for all Charges, Tuition, and Fees associated with your courses. All courses will be dropped for the above term; and applicable withdrawal grades will be assigned by instructors.

**Expected return, if applicable:**

**Reason for withdraw:**  
- ☐ Family Obligations  
- ☐ Medical  
- ☐ Maternity  
- ☐ Military  
- ☐ Financial  
- ☐ Dissatisfaction with program  
- ☐ Change in career goals  
- ☐ Other:

*Please feel free to complete the questions on the back of this form as well.*

Do you receive financial aid?  
- ☐ Yes  
- ☐ No

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**Step Two:** Meet with the offices/individuals listed below**

<table>
<thead>
<tr>
<th>Program Director or VP Student Services:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exit interview completed</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Accounting Office: Financial obligations met</th>
<th>Date:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Financial Aid Office: Exit counseling completed</th>
<th>Date:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Librarian: No outstanding materials</th>
<th>Date:</th>
</tr>
</thead>
</table>

**We do encourage that you meet with the above offices and acquire these signatures, but this is not required for your withdrawal.**

**Upon submitting this withdrawal authorization, I acknowledge that I have a maximum of one year from the last date of attendance to reenroll. If I do not register for courses within one year, I will be administratively withdrawn from the program.**

**Student signature & date:**

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**Step Three:** Submit form to the Registrar’s Office

<table>
<thead>
<tr>
<th>Received by registrar’s office:</th>
<th>Refund due:</th>
<th>☐ Yes</th>
<th>☐ No</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Last date of attendance:</th>
<th>☐ CAMS updated</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Effective date of withdrawal:</th>
<th>☐ Copy to Director of Financial Aid</th>
</tr>
</thead>
</table>

**Form completed by Registrar if student withdrawn administratively due to non-attendance**

- ☐ Withdrawn from ____________ term  
- ☐ Withdrawn from ____________ program

As of ________________________ Registrar’s initials: ___________________
**Withdrawal Questionnaire* (Optional)**

1. Please describe the factor(s) that influenced your decision to withdraw:

2. Which student services resources were most helpful to you while enrolled? (Please check all that apply)
   - Academic advising
   - Tutoring
   - Faculty Office Hours
   - Budget/Financial Counseling
   - Career Services
   - Student Organization(s)
   - InterTransform Mentoring Circle
   - Housing Support (New student housing digest, housing opportunities page, resource guides)
   - N/A

3. What, if any, additional resources would have been helpful to you as a student?