

WITHDRAWAL APPLICATION

** Please Note that this form can only be used by students who are currently registered.*

| Part I: Student Information | | | |
|-----------------------------|------------------|----------------|------------|
| | | | U |
| Last Name | First Name | Middle Initial | Student ID |
| Street | | | |
| City | | State | Zip Code |
| Area Code | Telephone Number | Email Address | |
| Reason For Withdrawal | | | |

| Part II: Withdrawal Information (This section must be completed) | | | |
|--|--|--|--|
| / | | / / | |
| Withdrawal Term / Year | | Date of Last Class Attendance MM / DD / YYYY | |
| <i>Note: the Date of Last Attendance must be the same date or prior to the date at the bottom of this Withdrawal Form.</i> | | | |

| | | | | | |
|-----------------------|--|----------------------------|--|---------------------------|--|
| Veterans Only: | | Veterans Affairs Benefits? | | Social Security Benefits? | |
|-----------------------|--|----------------------------|--|---------------------------|--|

A student is eligible for a full refund of registration fees when withdrawing from the University during the first week of classes of any term. A student is eligible for a 25% refund of registration fees for **Fall** and **Spring** terms when withdrawing from the University **between the start of the second week and the end of the fourth week of classes**. A student is eligible for a 25% refund of registration fees for **Summer** term when withdrawing from the University **between and start of the second and end of the third week of classes** of the earliest **session** in which registered. Refer to the current semester/term **Schedule of Classes** for specific withdrawal dates. All refunds must be requested on a Refund Request Form from the Cashier's Office, BAY 132.

EXCEPTIONS TO THESE DEADLINES WILL BE CONSIDERED FOR THE FOLLOWING:

- University Error – Provide a supporting statement from an appropriate University Official and a completed Fee Adjustment Form.
- Call To Active Military Duty – Provide a copy of orders and a completed Fee Adjustment Form.
- Student Illness – Provide supporting statement from physician and a completed Fee Adjustment Form.

NOTICE TO FINANCIAL AID RECIPIENTS:

If you withdraw before you complete more than 60% of a semester, you may owe a repayment. The Office of Financial Aid will notify you of the repayment amount.

Student Signature

Date

| FOR RESIDENT HALL STUDENTS ONLY | | | |
|---------------------------------|---|--|-------|
| 1. | Resident Instructor: | | Date: |
| 2. | Housing/Food Service: (Return key, linen, ID card & change of address.) | | Date: |

DO NOT WRITE BELOW THIS LINE

| | |
|---------------------------------|------------------|
| Effective Date of Semester/Term | Initials & Date: |
|---------------------------------|------------------|