

STUDENT INITIATED COURSE WITHDRAWAL

Student Initiated Course Withdrawal Policy—please see Academic Catalog for full details:

The student is responsible for collecting all necessary signatures and submitting the completed form to the Registrar's Office. No fee is assessed for a course withdrawal. However, withdrawn courses are included in the tuition charge for the semester/term. Due dates are as follows:

1. Semester Courses: Students may withdraw from one or more courses after the Add/Drop Period, but prior to the **end of week 10**.
2. Undergraduate Term Courses: Students may withdraw from one or more courses after the Add/Drop Period, but prior to the **end of week 5**.
3. Graduate Term Courses: Students may withdraw from one or more courses after the Add/Drop Period though **60% of the term**.

TO BE COMPLETED BY THE STUDENT

_____ Student Name		_____ Student ID Number		_____ Date	
1. After this form is processed, I will be registered for _____ credits for the semester/term.					
2. I am currently a NCAA athlete: <input type="checkbox"/> Yes <input type="checkbox"/> No					
Course from which you wish to withdraw:					
_____ Semester/Term		_____ Year		_____ Course Number and Section	
_____ Course Title					
_____ Student Signature				_____ Date	

TO BE COMPLETED BY THE INSTRUCTOR

Your signature below acknowledges that you have discussed the consequences of withdrawing from this course with the student; it does not necessarily indicate your approval.

_____ Instructor Signature		_____ Date		_____ Print Name	
REQUIRED: Student's last date of attendance/participation: <input style="width: 150px; height: 20px;" type="text"/>					

_____ Advisor Signature		_____ Date		_____ Print Name	
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_____ Student Financial Services Signature		_____ Date		_____ Print Name	
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ATHLETES ONLY

Any withdrawals may affect full-time status for NCAA eligibility and will require the signature of your coach and NCAA Compliance Coordinator.

_____ Athletic Coach Signature		_____ Date		_____ Print Name	
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_____ NCAA Compliance Coordinator Signature		_____ Date		_____ Print Name	
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