



# College Withdrawal Form

Date \_\_\_\_\_

Student ID No. \_\_\_\_\_ Student's Name (Print) \_\_\_\_\_

Curriculum \_\_\_\_\_ Last Date Attended Classes \_\_\_\_\_

Reason for Withdrawal \_\_\_\_\_

To withdraw from college, a student must obtain this form from the appropriate Academic Dean's office and secure the signatures of the individuals listed below **IN THE ORDER IN WHICH THEY APPEAR.**

**SIGNATURE**

**DATE SIGNED**

1. Student's Signature \_\_\_\_\_

2. Academic Advisor \_\_\_\_\_

3. Academic Dean \_\_\_\_\_

4. Counseling or EOP Office\*  
(Campus Center 225/234) \_\_\_\_\_

5. Financial Aid Office  
(Campus Center 012) \_\_\_\_\_

6. Registrar's Office  
(Campus Center 012) \_\_\_\_\_

Official Withdrawal Date \_\_\_\_\_

Remarks: \_\_\_\_\_

**This form, when completed, must be returned to the Registrar's Office before the last ten days of classes.** The withdrawal will not be official until all signatures have been obtained and the form has been returned to the Registrar's Office. **No refunds will be given unless ALL clearances have been obtained.**

**NOTE:** Non-degree students need obtain only the signatures of the Student Service Center and the Registrar's Office.

**\*EOP STUDENTS are required to obtain the signature of the EOP director. ALL OTHERS obtain Counseling signature.**