

Request Form

Date: _____

Print Your Complete Name _____

Student ID# _____ Last _____ Middle Initial _____ First _____
Phone Number _____

Freshman Sophomore Junior Senior BLS * Non-Degree

REQUEST _____

Semester This Action Affects _____ Graduation Date _____ Major _____

List Courses Affected _____

Reason for Request

Note: UMW students will receive an email regarding this decision only through their UMW e-mail.

Decision Approved Not Approved Schedule Appointment

Need more information _____

Comments _____