COURSE WITHDRAWAL REQUEST
FOR A GRADE OF “W”

Name: ___________________________  ID Number: _____________  Term: _____________

Last  First  MI

Address: ____________________________________________________________  Telephone: _____________

Email: _____________________________________________________________

Policy: According to the Academic Catalog, courses may be dropped after the first three weeks of the semester until approximately the middle of the term (see official University calendar for specific dates each term); however, a grade of “W” is indicated on the student’s permanent academic record for the course. The grade of “W” does not imply that the student was either passing or failing the course at the time of withdrawal; credit is not included in the grade point average. Students who are withdrawing from all of their courses for the term must completely withdraw from the University.

Instructions: Complete the form below. The course instructor’s signature is required for each course withdrawal listed. Your advisor/mentor’s signature is required at the bottom of this form. Course withdrawals are not official until this form has been processed in the Office of the Registrar.

<table>
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<tr>
<th>CRN</th>
<th>Course</th>
<th>Sect</th>
<th>Instructor’s Signature</th>
<th>Date</th>
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Including the change requested on this form, show the TOTAL number of credits registered for the current term: ____________________________

NOTE TO FULL-TIME STUDENTS: By withdrawing to less than full-time status (UG 12 cr.; GR 9cr.), you may no longer be eligible for athletic participation, financial aid, or on-campus housing. Immediately contact each of those offices to determine your status.

I accept responsibility for the above course(s) changes(s). I understand that a grade of “W” will appear on my permanent academic record as the grade for the above course(s).

Student Signature: ________________________________________________  Date: _____________

I concur with the student’s decision to withdraw from the course(s) listed above.

Academic Advisor/ Mentor Signature: ________________________________  Date: _____________

Rev. 07/15