

Withdrawal Form

Student Name:	Student ID:	
Term: ☐ Summer 20		☐ Spring 20
Check all that apply:		
☐ SGSC Intercollegiate Athlete ☐ Receive VA benefits	☐ Direct Loan Recipient ☐ Live in the Residence Halls	☐ Dual-Enrolled Student* (I understand that withdrawing from classes may postpone my high-school graduation?
I request to be withdrawn	n from:	
☐ All of my classes this term	☐ The cours	se(s) listed below:
Course Reference Number	Course Prefix/Number	Instructor Name
Ex. 80168	Ex. ENGL 1101	Ex. Dr. Smith
 After the add/drop period, the A withdrawal will show up on Withdrawal after mid-term res Withdrawal may affect my eligany repayment of unearned gr 	gibility for financial aid this semester an	n hours. art of my hours attempted.
Student Signature		Date
-		
Advisor Signature		Date
*High School Counselor Signatu	re (If applicable)	Date
********	********	******
Office Use Only: Processed by	y:	Date: