

Instructions:

RECORDED COURSE WITHDRAWAL FORM

Registrar's Office

DO NOT USE THIS FORM IF YOU ARE WITHDRAWING FROM ALL OF YOUR COURSES.

If you are withdrawing from all of your courses, please begin the University Withdrawal process in Student Development, LRC 2.

Undergraduate students enrolled in a full-time course load cannot request to be withdrawn from their HPE course.

Name: Last First Middle Initial Local Address: Phone: Student ID#: Z ORU Email: Phone: Student ID#: Z ORU Email: Major: Classification: Freshmen Sophomore Junior Senior Graduate Student Term: Fall Spring Summer Year:	Name:			Date:	
Student ID#: Z					
Birth date :	_				
Classification:					
Term:					
I receive veteran's benefits.	Classification: Freshmen	\square Sophomore \square Junior \square S	enior Gradua	ate Student	
STUDENTS: 1. Obtain grade and instructor's signature. 2. Obtain approvals as noted below. (Graduate students - Graduate Dean/International students - International Advisor/Financial Aid Representative - if receiving financial aid). CRN # COURSE # COURSE NAME GRADE INSTRUCTOR'S DATE (PASS/FAIL) SIGNATURE Trecognize that my withdrawing from the above course(s) may adversely affect my degree program and statudent's signature: Date:	Term: ☐ Fall ☐ Spring [☐ Summer Year:			
STUDENTS: 1. Obtain grade and instructor's signature. 2. Obtain approvals as noted below. (Graduate students - Graduate Dean/International students - International Advisor/Financial Aid Representative - if receiving financial aid). CRN # COURSE # COURSE NAME GRADE INSTRUCTOR'S JIGNATURE COURSE NAME GRADE INSTRUCTOR'S SIGNATURE COURSE NAME GRADE INSTRUCTOR'S SIGNATURE COURSE NAME (PASS/FAIL) SIGNATURE COURSE NAME OUT INSTRUCTOR'S SIGNATURE COURSE NAME (PASS/FAIL) SIGNATURE COURSE NAME OUT INSTRUCTOR'S SIGNATURE COURSE NAME (PASS/FAIL) SIGNATURE COURSE NAME OUT INSTRUCTOR'S SIGNATURE COURSE NAME (PASS/FAIL) SIGNATURE COURSE NAME OUT INSTRUCTOR'S SIGNATURE COURSE NAME (PASS/FAIL) SIGNATURE COURSE NAME OUT INSTRUCTOR'S SIGNATURE COURSE NAME (PASS/FAIL) SIGNATURE COURSE NAME OUT INSTRUCTOR'S SIGNATURE COURSE NAME (PASS/FAIL) SIGNATURE COURSE NAME OUT INSTRUCTOR'S DATE COURSE NAME OUT	I receive veteran's benefits. [☐ Yes ☐ No I am an into	ernational studen	t. □ Yes □ No	
STUDENTS: 1. Obtain grade and instructor's signature. 2. Obtain approvals as noted below. (Graduate students - Graduate Dean/International students - International Advisor/Financial Aid Representative - if receiving financial aid). CRN # COURSE # COURSE NAME GRADE INSTRUCTOR'S JIGNATURE CRN # COURSE # COURSE NAME GRADE INSTRUCTOR'S SIGNATURE Trecognize that my withdrawing from the above course(s) may adversely affect my degree program and statement's signature: Date:	Lam a student athlete D Ver	s 🗖 No			
1. Award the appropriate grade of "PASS" for passing (grades A, B, C, or D) or "FAIL" for failing (grade of F) in the grade column below. 2. Obtain approvals as noted below. (Graduate students - Graduate Dean/International students - International Advisor/Financial Aid Representative - if receiving financial aid). 2. Sign and date this form in the space provided adjacent to the appropriate course. CRN # COURSE # COURSE NAME GRADE INSTRUCTOR'S SIGNATURE PASS/FAIL SIGNATURE recognize that my withdrawing from the above course(s) may adversely affect my degree program and state undent's signature: dvisor's signature: dvisor's signature: contact the appropriate grade of "PASS" for passing (grades A, B, C, or D) or "FAIL" for failing (grade of F) in the grade column below. 2. Sign and date this form in the space provided adjacent to the appropriate course. DATE PASS/FAIL Date: dvisor's signature: dvisor's signature: contact the propertiate grade of "PASS" for passing (grades A, B, C, or D) or "FAIL" for failing (grade of F) in the grade column below. 2. Sign and date this form in the space provided adjacent to the appropriate course. DATE PASS/FAIL Date: (International Students Only - Admissions) Inancial Aid Representative: (International Students Only - Admissions) Inancial Aid Representative: (International Students Only - Admissions) Inancial Aid Representative: (International Advisor: (International A	Tam a student atmete. 🗖 Tes				
recognize that my withdrawing from the above course(s) may adversely affect my degree program and stat udent's signature:	(Graduate students - Graduate students - International Advise	e Dean/International or/Financial Aid 2.	in the grade colu Sign and date thi	imn below. is form in the space provided	
recognize that my withdrawing from the above course(s) may adversely affect my degree program and statudent's signature: Date: Date: Continuous and statudent's signature: Continuous and statudent's signature:					
recognize that my withdrawing from the above course(s) may adversely affect my degree program and state advisor's signature: Date:			(PASS/FAIL)		DATE
dvisor's signature:			(PASS/FAIL)	SIGNATURE	
udent's signature:			(PASS/FAIL)	SIGNATURE	<u> </u>
ternational Advisor:			(PASS/FAIL)	SIGNATURE	
(International Students Only – Admissions) nancial Aid Representative:	recognize that my withdra	awing from the above course(s)	(PASS/FAIL)	y affect my degree progra	
(International Students Only – Admissions) nancial Aid Representative:	recognize that my withdra		(PASS/FAIL)	y affect my degree progra	am and state
(Students Receiving Financial Aid Only – Financial Aid) ean's Approval:	recognize that my withdraudent's signature:		(PASS/FAIL)	y affect my degree progra Date:	am and state
ean's Approval:Date:Date:	recognize that my withdra udent's signature: dvisor's signature:	awing from the above course(s)	(PASS/FAIL)	y affect my degree progra Date: Date: Date: Date:	am and state
	recognize that my withdra tudent's signature: dvisor's signature: tternational Advisor: anancial Aid Representative:		(PASS/FAIL) May adversel sions)	y affect my degree progra Date: Date: Date: Date:	am and state