

Withdrawal Form

Student Name: first/last			
Course: name/code			
withdrawn within the first mark will not appear on th	5 days after red e student trans	ceiving a mid cript.	nest to drop a credit. If it is l-term mark, the course and no evaluation or final exam.
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☐ I wish to withdraw this course and no longer continue with the course.			
☐ I wish to withdraw this	course and au	dit for the re	mainder of the course.
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Student Signature		Date	
-			
Parent/Guardian Signature (if under 18)		Date	
Comments:			
optional			
For Office Use Only:			
Signature:		Date:	
Notes:			