



**NOTIFICATION OF WITHDRAWAL FROM UNIVERSITY  
FOR CURRENTLY ENROLLED STUDENT**

*(prior to start of semester)*

Withdrawal effective for \_\_\_\_ SPRING \_\_\_\_ SUMMER \_\_\_\_ FALL 20 \_\_\_\_ semester.

STUDENT NAME \_\_\_\_\_ WIN \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

MAJOR \_\_\_\_\_ ADVISOR \_\_\_\_\_

STATUS \_\_\_ Full-time \_\_\_ Part-time RESIDENT STUDENT? \_\_\_ Yes \_\_\_ No

REASON FOR WITHDRAWAL

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

IF TRANSFERRING,  
INSTITUTION TO WHICH STUDENT WILL TRANSFER \_\_\_\_\_

\_\_\_\_\_  
University Official

\_\_\_\_\_  
Originating Office

\_\_\_\_\_  
Date

cc: Controller's Office  
Residence Life  
Student Affairs  
Advisor

Procurement  
Library  
College office  
IT Network Services

Public Safety  
Undergraduate Admissions  
Mailroom  
Student Services