



Request for Individual Course Withdrawal

Office of the Registrar - 111 Bray Hall

Date:

Student Name:

Student ID#:

Permanent Address:

Street Address and Apartment Number

City

State or Province

Zip or Post Code

Country

Home Phone:

Cell Phone:

SU e-Mail:

Alternate e-Mail:

Course Withdrawal Request:

I request that I be withdrawn from the following courses, with the understanding that I may elect to withdraw from an individual course at any time between the end of the 4th week of the semester, and the end of the 14th week of the semester in accordance with the following policy (precise deadline dates are listed in the ESF Academic Calendar). **ESF Course Withdrawal Policy:** Between the end of the 4th week and the end of the 9th week, a grade of "W" will be recorded for the course on a student's transcript, with no effect on a student's semester or cumulative GPA. Between the end of the 9th and the end of the 14th week, the instructor of record may elect to assign a grade of "W," or "WF" if a student is deemed to be failing the course at the time of withdrawal. Grades of both "W" and "WF" will have no impact on a student's semester or cumulative GPA.

I have read the ESF Course Withdrawal Policy provided to me on this form and consulted with the appropriate college offices to ensure that I fully understand the need to be registered for at least **12 credit hours** to maintain "full-time" status, as well as the potential financial aid consequences of falling below a full-time course load.

Student
Signature

Course Prefix &
Number (i.e. ESF 301):

Course
Name:

Credit
Hours:

Instructor Signature:

Course Prefix &
Number (i.e. ESF 301):

Course
Name:

Credit
Hours:

Instructor Signature:

Course Prefix &
Number (i.e. ESF 301):

Course
Name:

Credit
Hours:

Instructor Signature:

Advisor Approval:

For your course withdrawal to take effect, you **MUST** obtain your advisor/MP's approval signature and return this completed form to the Office of the Registrar, 111 Bray Hall prior to the published Withdrawal Deadline:

Advisor or
Major Prof.
Signature