



State University of New York
College of Environmental Science and Forestry

International Programs Withdrawal Form

Participant Information

SU ID#: _____ OR SSN#: _____

Name: _____
Last Name First Name Middle Initial

Program Title: _____

Program Type: Fall Winter Spring Summer Year: _____

Reason for Withdrawal:

Financial Obligations

- I understand that if I withdraw from a program, the program deposit will not be refunded.
- I understand that refunds are limited to recoverable expenses based on the structure of the program and the date of withdrawal.
- I understand that I will still be charged the full cost and not receive a refund of program fees or receive academic credit if I am suspended and/or dismissed from the program for conduct or academic violation reasons.

If you are eligible for a refund, please indicate your preference for reimbursement

- Credit my student account
- Mail a check to the following address:

 Number & Street Apartment # City State

 City State Postal Code Country

Participant Signature: _____ Date: _____

**Please submit this form to the Office of International Education:
302 Bray Hall
1 Forestry Drive
Syracuse, NY 13210-2782**