COURSE WITHDRAWAL REQUEST FORM

(AFTER ADD AND DROP PERIOD)

STUDENT ID #	T ID #QUARTI		R	YEAR
STUDENT NAME _	Last		First	6 d'lll
	Last		FIRST	Middle
Last Date of Attenda	nce:			
COURSE NO	COURSE TITLE	UNITS	SESSIONS ATTENDED	REFUND AMOUNT
1				
2				
3				_
4				_
			RECEIPT#	_ TOTAL: \$
	DRAWING THE COURSES		DATE	
STUDENT IS MEETING SAP REQUIREMENTS: YES NO; REQUEST IS DENIED				
ASSOCIATE ACADEMIC DE	AN		DATE	
ASSOCIATE ACADEN	IIC DEAN TO INFORM INSTRU	JCTORS OF S	STUDENT'S WITHDRAWAL FROM (<u>COURSES</u>
FINANCE OFFICER			DATE	
RECORDED BY REGISTRAR DATE				