Wilmington University
Office of the Registrar

Request to Withdraw from Course(s)

Student’s Name: __________________________________________________________
Student’s I.D. Number: ____________________________________________________
Student’s Phone Number: _________________________________________________

WITHTDRAW FROM:

Print Subject, Course Number, CRN in the space provided
(example: ENG 121, CRN 10390)
For: ☐ Fall ☐ Spring ☐ Summer
_______ (Year)

1)
2)
3)
4)
5)
6)

IMPORTANT:
Withdrawal Forms should be delivered in person, mailed or faxed to the Registrar’s Office (302) 328-8907 or home site office by the appropriate deadline to be valid. Students may refer to the academic calendar to obtain deadlines for withdrawing from a course.

The Office of the Registrar will use the postmark date for mailed or faxed course withdrawal requests as the determinant date for deadline.

Signature: ___________________________ Date: __________________________

Please carefully read and answer all of the following questions regarding your withdraw. Also, provide your initials where indicated.

<table>
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<tr>
<th>Student Initials</th>
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Withdrawing does not release you from financial responsibility or obligation for the course(s).

Do you receive financial aid or other benefits to pay for your course(s)? YES_____ NO_____

Indicate the last day you attended class. _______________________

Will you be re-entering courses during this term/payment period? YES_____ NO_____

You are responsible to withdraw from class if you stop attending. You will not be automatically withdrawn.

You may withdraw from a course without academic penalty prior to course withdrawal deadlines. Failure to withdraw before deadline results in a failing grade (“FA” or “F”).

NOTE: Students receiving financial aid should contact the Financial Aid Office to determine potential effects on eligibility related to making changes in course credit load.