MONITORED WITHDRAWAL REQUEST FORM

Student Name ___________________________________ PeopleSoft # _______________________

(Print Last Name, First Name, MI) _______________________

YEAR

Fall ______
Spring ______
Summer ______

<table>
<thead>
<tr>
<th>Subject</th>
<th>Class #</th>
<th>Catalog #</th>
<th>Credits</th>
<th>Course Title</th>
</tr>
</thead>
</table>

PLEASE NOTE:
Students who Withdraw from a course receive a “W” grade and no credits are earned. **There will be no tuition adjustment for withdrawing from a course. Check the Calendar of Important Dates for deadlines and rules regarding when the Director of Academic Advising must also sign this form before submitting it to the Registrar.**

**I AFFIRM MY DECISION TO WITHDRAW FROM THE ABOVE COURSE AND TO ACCEPT THE “W” GRADE. I ALSO UNDERSTAND THAT THERE WILL BE NO TUITION ADJUSTMENT FOR WITHDRAWING FROM THIS COURSE.**

Student’s Signature_____________________________ Date________________

Instructor’s Signature ___________________________ Date __________________

*Only required after withdrawal period is over.*

*Director of Academic Advising ___________________________ Date __________________

The student is responsible for taking this form to the Registrar for processing after it has been signed by the Instructor and/or Director of Academic Advising.