

<b>STEVENSON UNIVERSITY WITHDRAWAL FROM CLASS FORM</b>
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**Office of the Registrar**

This form must be fully completed, signed by the student's advisor, and returned to the Registrar's Office by the student. A grade of W will be assigned prior to the last day to withdraw from a class. If a student withdraws after the last day to withdraw, a grade of WF will be assigned.)

Name: \_\_\_\_\_ Semester: \_\_\_\_\_ Date: \_\_\_\_\_

Student ID: \_\_\_\_\_ Full-Time: \_\_\_\_\_ Part-Time: \_\_\_\_\_ Non-degree \_\_\_\_\_

**COURSE(S) TO BE WITHDRAWN:**

*(This form is not to be used if you are completely withdrawing from all registered courses)*

Session	Course Name	Number	Section
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**REASON FOR WITHDRAWAL:**

\_\_\_\_\_

**COURSE TO BE AUDITED:**

Session	Course Name	Number	Section
_____	_____	_____	_____
_____	_____	_____	_____

**ATHLETIC ELIGIBILITY NOTE:** *Eligibility is affected when students drop below full-time.*

**VETERAN'S NOTE:** *We are required to submit changes in status to the VA.*

**FINANCIAL AID NOTE:** *Financial aid eligibility may be affected by withdrawal from or auditing a course. Please contact the financial aid office before submitting this form to the Registrar's Office.*

\_\_\_\_\_  
*Student's Signature*

\_\_\_\_\_  
*Advisor's Signature (degree seeking only) Date*

**To be completed by Registrar's Office:**

Date entered in system: \_\_\_\_\_ by \_\_\_\_\_