

Complete this form if you intend to leave Carnegie Mellon with no intention to return. Read the policy on the following pages prior to completing this form. **Prior to withdrawal, you must contact your academic advisor. Withdrawal may jeopardize your financial aid status, contact The HUB for details.** Federal law mandates students on F1 or J1 Visa contact the Office of International Education **prior** to withdrawal.

Withdrawal

STUDENT INFORMATION

Student Andrew ID: _____

Student Name: _____
Last/Family, First and/or Preferred, MIPermanent Address: _____
Street Address/PO Box, City, State, Zip, Country (if not US)Current Address: _____
Street Address/PO Box, City, State, Zip, Country (if not US)

Telephone #: _____ Mobile Phone #: _____ Personal Email Address: _____

Home College: _____ Department: _____ Class: _____

Semester of Withdrawal (*check one*): Fall Spring Summer-1/All Summer-2 20 _____Student's Signature: _____ Date: _____
mm/dd/yyyy

WITHDRAWAL INFORMATION

Student's Reasons for Withdrawal (*optional*): _____

DEPARTMENT INFORMATION & SIGNATURES

Date Student Began Withdrawal Procedure (*mm/dd/yyyy*): _____ W Grade(s) Assigned? Yes No Advisor: _____ Signature: _____ Date: _____
Required for All Students Print NameDept. Head: _____ Signature: _____ Date: _____
Graduate Students Only Print NameAssociate Dean: _____ Signature: _____ Date: _____
Undergraduate Students Only Print Name

DEAN OF STUDENT AFFAIRS

Comments/Requirements: _____

Dean of Student Affairs: _____ Signature: _____ Date: _____
Print Name

OFFICE USE ONLY

Semester _____ Units Dropped _____ New Enrollment Status _____ Adjusted Tuition _____ Initials/Date _____