



Special Session Program Withdrawal / Leave of Absence Form

INSTRUCTIONS

- Please print and attach documentation (i.e. refund form, doctor's note)
- Obtain appropriate signatures
- Fill out drop/withdrawal form and attach

University ID# _____ Phone # () _____ Date _____

Name _____
Last
First

Last semester of attendance _____ Program and Cohort _____ Term you will return _____

Reason for Withdrawing _____

***Please Note:** If leave of absence is longer than 1 semester, you will need to reapply to the university

Student's signature _____
Date

Advisor's signature _____
Date

Program Manager's Signature _____
Date

OEIE Dean's signature _____
Date

OFFICE USE ONLY

Student dropped from class (if applicable):	Student refunded (if applicable):
Student fees reversed (if applicable):	Student officially withdrawn from University (if applicable):