Withdrawal Form

ID#______________ SP___ SU___ FL___ Year: _______

The OFFICIAL date of withdrawal is determined by the date that the first contact is made by the student to initiate the withdrawal process. Charges and/or refunds to the student's account and grades are based on this date.

Circle Program: Traditional Adult One Year Executive Masters

Major/Degree____

____ Receiving VA Benefits: ______ Y ______N
Name

____
Address

____ _______________________________
City State Zip Last Data of Attendance

____
Phone

____
Reason for Withdrawal

____
Student Signature Date

— —

(Official Use Only)
In order for a student to be OFFICIALLY withdrawn from Faulkner University, he/she must be clear with each of the following offices:

Adult/Traditional Students

________ Student Success R117 (Traditional Students Only)

________ Business Office

________ VA Coordinator

________ Dean of Students

________ Library

________Financial Aid*

Executive/Masters Programs

________ Program Director

________ Business Office

________ VA Coordinator

________ Registrar's Office

________ Financial Aid*

* Financial Aid will send you a revised award letter.