

**PRAIRIE VIEW A&M UNIVERSITY – Office of the Registrar
WITHDRAWAL FROM THE UNIVERSITY**

(This form to be used ONLY when student drops all courses)

Term Data				Fall	Summer	Spring
	Student ID#	Major	Classification	Semester Year		
Name (Please print)						
	Last	First	MI			

REASON FOR WITHDRAWAL: Please check one

<input type="checkbox"/> Academic difficulty	<input type="checkbox"/> Employment/work	<input type="checkbox"/> Educational Leave
<input type="checkbox"/> Transferring to:	<input type="checkbox"/> Health	<input type="checkbox"/> Housing
_____	<input type="checkbox"/> Financial	<input type="checkbox"/> Conflict with work schedule
(College/University Name)	<input type="checkbox"/> Childcare	<input type="checkbox"/> Family problem
		<input type="checkbox"/> Military call to active duty
Other: _____		

NOTE: THE STUDENT MUST TAKE THIS COMPLETED FORM TO THE REGISTRAR'S OFFICE BY THE DEADLINE AS LISTED ON THE ACADEMIC CALENDAR OR THE WITHDRAWAL WILL NOT BE ALLOWED AND GRADES WILL BE ASSIGNED. SEE SCHEDULE OF CLASSES FOR DETAILS.

Student's Signature	Date
Advisor/Department Head/Dean	Date
Financial Aid	Date
Student Services	Date

Registrar's Office
Use Only

Processed

By: _____

Date: / /

COPIES: 1. Registrar's Office 2. Financial Aid 3. Auxiliary Services 4. Student Services

