



Graduate Course Late Withdrawal Form

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
 Student Number: \_\_\_\_\_ Email Address: \_\_\_\_\_  
 Graduate Degree Program: \_\_\_\_\_  
 Graduate Advisor's Name: \_\_\_\_\_  
 Semester and Year requesting late withdrawal: \_\_\_\_\_  
 Reason for withdrawal: \_\_\_\_\_

COURSES TO BE DROPPED:

Course ID (e.g.: ACC 611)	Section Number (e.g.: 01, 02)	Credit Hours	Course Instructor Decision	Course Instructor Signature
			( ) Approved ( ) Not Approved	
			( ) Approved ( ) Not Approved	
			( ) Approved ( ) Not Approved	
			( ) Approved ( ) Not Approved	
			( ) Approved ( ) Not Approved	
			( ) Approved ( ) Not Approved	

Graduate Program Director Decision  
 ( ) Approved  
 ( ) Not Approved

\_\_\_\_\_  
 Graduate Program Director Signature

Dean of The Graduate School Decision  
 ( ) Approved  
 ( ) Not Approved

\_\_\_\_\_  
 Dean of The Graduate School Signature

DO NOT WRITE BELOW

Grant     Loan     Scholarship     Graduate Assistant     Housing

Credits Change from \_\_\_\_\_ to \_\_\_\_\_    Tuition Refund % \_\_\_\_\_    \_\_\_\_\_  
 Authorized Signature (refund only)