

DEGREE APPLICATION WITHDRAWAL FORM

I am officially requesting to withdraw my Spring/ Summer/ Fall application for graduation. I understand that I must apply again for my degree and pay the application fee during the filing period for the graduation date by which I will complete **ALL** of my degree requirements.

My new expected graduation semester is: _____

Name (Please Print) I.D. Number

Major Title Phone #

Street Address City State Zip Code

Signature of Applicant Date

Reason for Withdrawal (required):

E-mail address (required): _____

For Office Use Only

Approved/ Denied **Initials:** _____ **Date Student Notified:** _____
Circle One

Entered By: _____ **Date:** _____