

IDENTIFICATION NUMBER

LAST NAME FIRST NAME M.I.

SEMESTER

YEAR

COURSE	COURSE CODE	CREDITS	INSTRUCTOR
TOTAL			

WHITE REGISTRATION COPY  
 YELLOW STUDENT COPY  
 PINK DEPARTMENT COPY

# COURSE WITHDRAWAL

THE GRADUATE SCHOOL AND UNIVERSITY CENTER  
 OF THE CITY UNIVERSITY OF NEW YORK  
 365 FIFTH AVENUE, NEW YORK, NY 10016

F.O.M.I.	DISCIPLINE	CLASS CODE

REASON FOR WITHDRAWAL

EXECUTIVE OFFICER'S OR ADVISOR'S SIGNATURE DATE

STUDENT'S SIGNATURE DATE