

The Graduate School and University Center
of The City University of New York

Date: 5/3/2000
Operator: Carol
File: Request for Withdrawal(w)

Office of the Registrar
The Graduate Center: 365 Fifth Avenue, New York, NY 10016

Request for Withdrawal

To the Executive Officer: After completing this form, please return it to the Registrar's Office. Upon approval, a copy will be forwarded to your office for your records.

- Ph.D.**
 M.A. Program in

			Date
Student's Name			
	First	Middle/(Maiden)	Last
Student's I.D. number	- -	Date of Birth	/ /
			Month Day Year
Student's Address			Telephone
Number and Street			(Area Code)
City or Borough			Zip Code
Effective Date of Requested Withdrawal			/ /
			Month Day Year

An exit interview with the Financial Aid Officer is required for a student in the Perkins/Direct Student Loan Program who wishes to withdraw.

Reasons for Requested Withdrawal (accompanied by copies of supporting documents)

Approval of Executive Officer

	Date
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Please note that the approval of the Executive Officer does not *ipso facto* signify that the withdrawal has been granted. Clearance must be obtained from the Director of Financial Aid, the Director of the Office of International Students, the Director of Residence Life, the Librarian, the Bursar, and the Business Office before the withdrawal can become effective.

Clearance Dates

<input type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared	Director of Financial Aid	Date
<input type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared	Director of the Office of International Students	Date
<input type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared	Director of Residence Life	Date
<input type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared	Librarian	Date
<input type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared	Bursar	Date
<input type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared	Business Office	Date

For office use only
345-202-(7/89)

Date approved	Fomi	Class	Admitted
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