

Resignation Form

Office of the Registrar

Please use this form to withdraw from all classes for the current semester.
To drop individual classes, use the Add/Drop form.

_____ Fall _____ Spring _____ Summer

Our desire is for students to succeed in reaching their college goals. All students should carefully consider their decision to initiate their resignation from the university.

Student ID: _____

Name: _____
Last, First, MI

Address: _____

Phone Number: _____

Reason: _____

I wish to resign from all of my classes this semester. I understand that this request may not be completed until I have contacted my advisor and course instructors. I also understand that there may be serious impact from this action if I receive any type of financial aid including grants, loans, or scholarships. The Financial Aid Office will be notified regarding my resignation from classes.

I understand that only those resignations submitted during the refund period will be eligible for a refund and I have reviewed the refund schedule that is published on the Registrar's website. I also understand that 100% refunds are not issued prior to the first class day even if a student's specific classes start after that day. I understand that if I am on a payment plan, I am still responsible for the original tuition and fee charges and that even if I resign during a refund period, I may still have future payments due on my plan.

Student Signature

Date of Request

If the timing of my resignation is after the 12th class day in the Fall/Spring or after the 4th class day in the Summer, I understand that I must complete a withdrawal form in addition to the resignation form and obtain the signature of all instructors.

Resignations/Withdrawal forms will be processed as of the last day of attendance as indicated on the withdrawal form.