

TEXAS A & M INTERNATIONAL UNIVERSITY WITHDRAWAL FROM ALL COURSES

PLEASE PRINT ALL INFORMATION

Name _____ CWID or SSN _____

Mailing Address: _____

Home Phone #: _____ Work Phone #: _____ E-mail: _____

Degree Pursuing _____ Class _____ Major/Minor _____

REASON FOR WITHDRAWAL:

- Work (WK) Personal (PS)
 Family Problem (FP) Course too difficult (TD)
 Medical Reasons (HE) Other _____

COURSES WITHDRAWING FROM:

PROFESSOR:

Student Signature _____

Date _____

Note: Student records will be held until all holds are cleared.

If you receive **FINANCIAL AID**, you must also obtain a signature from the financial aid office:

Checked by Financial Aid Office on _____ by _____

- Aid not disbursed, cancelled by FA
 Aid disbursed, Sc325 - enter "H" hold
 Receiving Title IV, enter 62 hold sc348

Financial Aid Office Use Only: Pell Grant, SEOG received, route to counselor, by: _____

Stafford Loan(s) received, route to counselor, by: _____

REGISTRAR'S OFFICE USE ONLY:

INTERVIEWER COMMENTS: _____

Tuition and fees paid with: _____

REFUND DUE --withdrew prior to first class day or during first four weeks regular semester

Percentage: _____ Attach copy of refund request form Hold #62 posted if needed

Matriculation Ended on Screen 110 SCREEN 119 POSTED

WITHDRAWAL PROCESSED BY: _____ DATE: _____

PROFESSORS NOTIFIED BY: _____ DATE: _____

8/03

white copy - Registrar's Office / yellow copy - refund record / blue copy - financial aid / pink copy - student copy
G:\forms\Withdrawal from all classes.wpd

956-326-2250 / 956-326-2249 (fax)