TEXAS A & M INTERNATIONAL UNIVERSITY
WITHDRAWAL (DROP) FORM

PLEASE PRINT ALL INFORMATION

PLEASE NOTE: If withdrawing from ALL COURSES for the semester, a different form must be completed and appropriate signatures obtained.

If you receive FINANCIAL AID, you must also obtain a signature from the Financial Aid Office on the line indicated below.

SEM/YR: _______ NAME: ___________________________ CWID# ___________________________

1) COURSE FROM WHICH WITHDRAWAL IS REQUESTED:

Course Number and Section Title ___________________________ Professor ___________________________

2) COURSE FROM WHICH WITHDRAWAL IS REQUESTED:

Course Number and Section Title ___________________________ Professor ___________________________

REASON FOR DROPPING COURSE (S):

☐ Work ☐ Personal
☐ Family Problem ☐ Course too difficult
☐ Medical Reasons ☐ Other ___________________________

Student Signature ___________________________ Date ___________________________

☐ Checked by Financial Aid Office on ____________ by ___________________________

Duplicate will be mailed to professor after withdrawal is processed.

FOR OFFICE USE ONLY: Date processed on SIS ____________ By: ____________

white copy - Registrar’s Office / yellow copy - Professor / blue copy - Financial Aid / pink copy - Student

4/04
g:\form\withdraw.wpd

Office of the Registrar / 5201 University Boulevard / Laredo, TX 78041-1900
956-326-2250 (voice) / 956-326-2249 (fax)
**TEXAS A & M INTERNATIONAL UNIVERSITY**

**WITHDRAWAL FROM ALL COURSES**

**PLEASE PRINT ALL INFORMATION**

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<tr>
<th>SEM/YR:</th>
<th>NAME:</th>
<th>SS#:</th>
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**REASON FOR WITHDRAWAL:**

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

**COURSES WITHDRAWING FROM:**

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<tr>
<th>COURSES WITHDRAWING FROM</th>
<th>PROFESSOR:</th>
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Student Signature __________________ Date __________

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

- [ ] Checked by Financial Aid Office on ____________ by ____________
- [ ] FA hold placed to retain aid
- [ ] hold #62 placed

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

**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: ____________

white copy - Registrar’s Office / yellow copy - refund record / blue copy - financial aid / pink copy - student copy

6/03

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