Application for Withdrawal from the University

IF THIS IS YOUR FIRST SEMESTER AT DOMINICAN DO NOT FILL OUT THIS FORM. PLEASE ASK FOR ASSISTANCE IN THE REGISTRAR'S OFFICE.

Students who withdraw from the University may apply for readmission through the Registrar's Office if their absence has been one year or less (two semesters and one summer). Students who do not return within a year must meet the* Catalog *requirements for admission and graduation in effect at the time of re-enrollment and must reapply through the Admissions Office

Please Print

Name_____ Student ID #_____
Last First Middle Initial

Address_____
Street/Apt #/PO Box City State Zip

Home Phone _____Work Phone_____

Email address _____ Date _____

Last date attended class (es) _____/_____/_____
Month Day Year

Advisors Name _____

I intend to permanently withdraw, effective date: _____

Reasons (check all that apply):

- ☐ Personal reasons (health, needs of family, changed educational goals, etc.)
- ☐ Financial reasons
- ☐ Dissatisfaction with quality of the educational experience
- ☐ Other _____

_____

I understand that a withdrawal may result in <u>financial aid adjustments</u> and <u>tuition liability</u> as well as <u>Veteran</u> and <u>F-1 Visa penalties</u>. Detailed information is available in the online university catalog and in the Registrar's Office.

Student Signature: _____Date_____

Financial Aid Signature _____ Date_____

Program Director's Signature (Graduate Students Only) _____

For Office Use Only: Date of first notification: _____ Date received in the Registrar's Office: _____

○ *Drop - refund OK* ○ *W - no refund* ○ *Partial refund* ○ *Computer*

Paper Distribution: White: Registrar Yellow: Financial Aid Pink: Student Gold: Advisor Revised 8/2012