

## OFFICIAL WITHDRAW FORM

For Graduate Students Only

NAME: \_\_\_\_\_

STUDENT ID: \_\_\_\_\_

Please check if new mailing address ☐

MAILING ADDRESS:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

I PLAN TO WITHDRAW FROM MILLERSVILLE  
UNIVERSITY ON:

### Current Enrollment Status

\_\_\_\_\_ Not registered for classes

\_\_\_\_\_ Registered for: Fall \_\_\_\_ Spring \_\_\_\_ Summer \_\_\_\_

**NOTE:** Contact your financial aid counselor prior to submitting this form to determine how withdrawing might affect your student account.

**Stafford Loan** \_\_\_\_ YES \_\_\_\_ NO

**Perkins Loan** \_\_\_\_ YES \_\_\_\_ NO

**VA Benefits** \_\_\_\_ YES \_\_\_\_ NO

\_\_\_\_\_  
DATE

**NOTE:** Spring /Fall terms - Grades of "W" will be assigned to students who withdraw between the 2<sup>nd</sup> and 10<sup>th</sup> week of class. Regular letter grades will be assigned from the faculty to students whose form is received after the deadline to withdraw from a class. For information on the winter & summer terms please contact the registrar's office.

**Students withdrawing from the university who plan to re-enroll at some future date will be required to submit an application for re-admission Graduate Admissions.**

To complete your withdraw, please add your signature and date below and email this form using your millersville email address to [AdultLearning@millersville.edu](mailto:AdultLearning@millersville.edu)

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

### OFFICIAL USE ONLY

OFFICIAL DATE OF WITHDRAW:

MEDICAL: \_\_\_\_ YES \_\_\_\_ NO

PROCESSED BY: \_\_\_\_\_

DATE: \_\_\_\_\_

SCHEDULE ACTION (REGISTRAR):

\_\_\_\_\_ COURSES DROPPED \_\_\_\_\_ TERM

\_\_\_\_\_ "W" RECORDED

\_\_\_\_\_ FINAL GRADE WILL BE ASSIGNED