



INDIVIDUAL COURSE WITHDRAWAL FORM  
Graduate School

*This is not the correct form to officially withdraw from the University*

Name:

Last

First

Middle

Student ID #:

E-mail:

Department Abbreviation	Course No.	Section	Credit Hours

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**Graduate School Use Only**

\_\_\_\_\_  
Grade

\_\_\_\_\_  
Approval

\_\_\_\_\_  
Date