



REQUEST FOR ADMINISTRATIVE WITHDRAWAL

Faculty initiated AWs are for non-attendance only and must be consistent with the published syllabus.

To: Vice President of Academic Affairs

From: _____

Date: _____

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Please withdraw the following student from Section _____.

Course prefix and course number are _____ for the 20__

___ Spring ___ Summer ___ Fall semester.

Student's Name: _____

Student's ID#: _____

Last Date Attended: _____

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Instructor's Signature

Division Dean's Signature

VPAA's Signature

Registrar/Asst. Registrar

Date recorded