



Registrar's Office
 400 St. Bernardine Street
 Reading, Pa. 19607
 Francis Hall, Room 203
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Course Withdrawal Form

This form is to be used for course withdrawals within the term, and not for withdrawing from the university. Students must review the University Refund Policy prior to completing this form. Term withdrawal deadlines vary by term and are posted on the Academic Calendar as "Last Day to withdraw without 'F'."

STUDENT INFORMATION

_____	_____	_____
First	Middle	Last
_____	_____	_____
Student ID Number	Year	Term

COURSE WITHDRAWAL INFORMATION

All information in table below is required for processing. List one course per line.

Course Name & Number (e.g. BUS 200)	Section	Instructor's Signature

STUDENT ACKNOWLEDGEMENT

I acknowledge and accept the charges that may be incurred by this schedule change request, and I have read and understand the policies applicable in the catalog.

I acknowledge withdrawing may affect my financial aid, athletic, and campus residency, and graduation eligibility.

_____	_____
Student Signature	Date

REQUIRED APPROVALS

_____	_____	_____	_____
Advisor's Signature	Date	Athletic Director's Signature (if athlete)	Date

_____	_____	_____	_____
Student Financial Services' Signature	Date	International Officer Signature (if F1 student)	Date

_____	_____
Registrar's Office Signature (final signer after form completed)	Date