

University Withdrawal Request

Semester: Fall _____ Spring _____ Summer _____ **Year:** _____

Commuter _____ Residence Hall _____

Name: _____ **L Number:** _____

Address: _____ **City:** _____ **State:** _____ **Zip Code:** _____

Telephone No: _____ **Classification:** FR _____ SO _____ JR _____ SR _____ GR _____

Are you one the following? International Student _____ Veteran _____ NCAA Student Athlete _____

Reason(s) for Withdrawal:

- | | |
|--|--|
| ☐ Academic Difficulty | ☐ University experience not what I expected |
| ☐ Financial Difficulty | ☐ Housing availability |
| ☐ Health/Medical reason | ☐ Transfer-Name of institution _____ |
| ☐ Planning to Enter Military Service | ☐ Lost Interest |
| ☐ Achieved my personnel Goals | ☐ School conflicts with work |
| ☐ Desired course/programs unavailable | ☐ Other _____ |

Do you plan on returning to the university? Yes _____ No _____

Please read and initial each statement showing you understand each statement.

____ I understand that withdrawing from the University of North Alabama may affect my financial aid status, and I take full responsibility for any additional financial obligations that may result from this withdrawal.

____ I understand that I am responsible for any outstanding balances that may result for tuition, fees, housing, meal plans, or any other fees associated with my time at the university.

____ I understand that I will be assigned W grades for all courses that I am withdrawn from regardless of my grade at the time of withdrawal.

____ I understand that if I reside in University housing, I am required to contact the University Housing Office upon withdrawal from the University. I agree to follow published checkout procedures and vacate university housing. If I have questions, I will contact Housing and Residence Life at housing@una.edu or 256-765-5558

Student Signature

Date

Office Use Only

Financial Aid Office: _____

Registrar's Office: _____