

Term Withdrawal Request

Office of the Registrar 847-491-5234 Fax: (847) 491-8458 nu-registrar@northwestern.edu

This form is for students to request withdrawal from the University, either for a current or upcoming term with an intent to return, or permanently. Students receiving financial aid, including student loans, living in University housing or studying on a University-sponsored F1 or J1 visa are responsible for contacting the associated offices on campus to inform them of this change in status.

	Ter	m and year:		
First Name		Last Name		Student ID
	School		Dual Degree	e School if applicable
Reason:	Transfer to another program or institution			
	Military service			
	Personal (family, pr	ofessional, etc.)		
((Optional):			
Retain				
Graduation Term (if applicable)			nove	
		Def	er to:	
Withdrawals in in an entry on t	the Fall, Winter, and Sprin he transcript documenting	g quarters with an "Effe the withdrawal date. V	=	the 6th week of classes will result pate" after the end of the 6th week
	Sto	udent Signature	Date	
Remove	e all future enrollment:			
Discont	inue the student record	Term	Nithdrawal Effective date:	
	Du	ual degree students must obt	ain signatures from both schools.	
Appro	over	Signature	Approver	Signature
Scho	ol	Date	School	