

Please note:

- Talk to your advisor about your academic career/plans before withdrawing.
- Complete this form only if you are dropping **all** courses, including online courses.
- We will not process this withdrawal form until it has been approved by the appropriate Faculty Officer and/or the Office of the Registrar.
- If you voluntarily withdraw **prior** to or **during** the first three calendar weeks from the start of classes, the term **will not** be recorded on your academic record and transcript.
- If you voluntarily withdraw from your studies **after** the first three calendar weeks of classes for the term, your transcript will indicate "Withdrawal: Effective Date" and "WD" or "WF" grades will display for classes in accordance with the penalty periods outlined in the Undergraduate Calendar.

Please print clearly.

If your home institution is Wilfrid Laurier University (WLU), please contact the Registrar's Office at WLU.

University of Waterloo Student ID Number

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Select where appropriate:

Withdrawal from University (not returning)

Withdrawal from term Fall 20____ Winter 20____ Spring/Summer 20____ Expected return date (if applicable) _____
month/year

Surname _____

Given Names _____

Future Mailing Address: Update your address in Quest.

Email communications will be delivered to your "@uwaterloo.ca" email address.

Program/Plan _____

Academic Level (e.g., 2B)_____ System of Study Regular Co-operative

Did you receive financial assistance from the University for this term? Yes No

If yes, where was it from? OSAP Scholarship/Bursary Other _____
Specify

OSAP entitlement will be recalculated based on this withdrawal. Any fee refund as a result of this withdrawal will be remitted directly to the National Student Loan Centre to be applied to your outstanding Ontario and/or Canada Student Loan.

Reason for Withdrawal Job obligations Personal/family Degree complete Health Required to Withdraw
 Financial: Please make an appointment with a Financial Aid Counsellor. Lack of interest
 Other _____

Student's Signature _____ Date _____

Faculty Acknowledgement (Engineering only)

Comments _____

Faculty Signature _____ Date _____

Faculty Name and Extension Number _____

Office of the Registrar Acknowledgement

Comments _____

Office of the Registrar Signature _____ Date _____ Effective Withdrawal Date ____/____/____
dd mm yyyy