East Texas Baptist University
Withdrawal from a Course

********This form should NOT be used to withdraw from ALL courses. A different form should be used for complete withdrawal from the university, and can be obtained from the Office of Academic Success & Graduate Services. ********

_____ _____ _____
Student's Full Name I.D. # or SSN: Cell Phone

Year: _____ Semester/Term (Circle One): Fall Spring May June July

ARE YOU CURRENTLY RECEIVING V.A. BENEFITS: _____ YES _____ NO

List the course to be dropped below. The student is responsible for completing this form accurately and completely. A student who desires to drop a course, must "Officially Withdraw" in order to protect his/her academic record. If withdrawing from a lab component taught by another instructor, an additional form will be required. This form is NOT considered complete, even if processed, and this withdrawal will not be considered official, unless ALL required signatures are obtained. This is particularly important for athletes and their coaches. Withdrawals may affect financial aid, athletic eligibility, & VA benefits regarding satisfactory academic progress and full-time enrollment. No student may withdraw from a course in which he/she has exceeded the total number of allowable absences. If the total number of allowable absences is exceeded a grade of „XF" will be assigned.

****** The last day to withdraw from a course is the date posted in the current catalog for that term. ******

If the withdrawal from this course results in you being enrolled in less than full-time (12 hours for undergraduates/6 hours for Master"s), then you must receive approval from Student Affairs and Financial Aid. Please indicate that you have received this approval by initialing the following space. _____

Course Number & Section **Title**

_____ _____

REQUIRED SIGNATURES: *(In the order listed below)*

1. _____ _____
Student ***(Your signature above indicates that you have read and understood the conditions and terms herein)*** Date

2. _____ _____
Coach *(If currently an athlete)* Date

3. _____ _____
Advisor Date
***If the student is in their last semester please review degree audit and the impact of this withdrawal on expected graduation.

4. _____ _____ _____
Instructor Today's Date Date Student Last Attended Class

5._____ _____ _____
Lab Instructor (if applicable) Today's Date Date Student Last Attended Class

INSTRUCTORS: Immediately deliver this form to the office of the Dean of your school so that the grade of „W" may be assigned. DEANS/ASSISTANTS: Upon receipt of this form, post grade via the Faculty Advising System (FAS). After the grade has been assigned, email the head coach and A.D., if the student is an athlete, then send this form to the Office of the Registrar where it will be placed in the student"s permanent file. If the student desires a copy of this form it may be obtained from the Registrar.