University of Illinois at Urbana-Champaign

## WITHDRAWAL / CANCELLATION

Office of the Registrar

	☐ FALL ☐ SPRING	SUMMER	YEAR	TODAY'S DATE	
PRINT LAST NAME	FIRST NAME	MI	UIN	COLLEGE	
				DEPARTMENT	
PERMANENT HOME ADD	PRESS:				
ACTION REQUESTED	☐ Cancellation☐ Withdrawal in Perso☐ Withdrawal in Abse		Effective date		
STUDENT MUST OBT	AIN SIGNATURES FROM		N THE FOLLOWING OR	DER:	
UNDERGRADU	JATE STUDENTS				
1) COLLEGE OFFICE	□ NOTIFY ISSS				
			SIGNATURE	PRINTED NAME	DATE
2) OFFICE OF INTERNA SERVICES (INT	TIONAL STUDENT & SCHOLA ERNATIONAL STUDENTS ONI	LR LY)	SIGNATURE	PRINTED NAME	DATE
3) OFFICE OF THE DEAN	N OF STUDENTS				
			SIGNATURE	PRINTED NAME	DATE
GRADUATE ST	TUDENTS				
1) DEPARTMENT OFFIC	CE		SIGNATURE	PRINTED NAME	DATE
2) OFFICE OF INITERNIA	TIONAL STUDENT & SCHOLA	D	SIGNATURE	I KINTED IVAME	DATE
SERVICES (INT	ERNATIONAL STUDENTS ONI		SIGNATURE	PRINTED NAME	DATE
3) GRADUATE COLLEG	E OFFICE				21112
-,			SIGNATURE	PRINTED NAME	DATE
Reason for leaving:					
Conditions for re-entry	<i>7</i> :				
that if any charges such charges are paid. I am a	h as library or laboratory fe	es are pending aga ting to refunds as a	ainst my account, a trans	Records Service Center. I furth cript or diploma will not be is e. Disciplinary action will be tak	sued until the
Student's Signature:					
SUBMIT COMPLETED FORM	M TO: Office of Admissions	and Records, Reco	rds Service Center, 901 W	est Illinois Street, Urbana	
FOR ADMISSIONS AND	D RECORDS OFFICE USE ON	LY			
Processed by/date		Comments			