

NOTIFICATION OF CANCELLATION/WITHDRAWAL

Full Name: _____

LAST FIRST MIDDLE

Date: _____

NetID: _____ **College/School** _____

Mailing address: _____

Number Street City State Zip

Email (non-Creighton): _____ **Phone Number:** _____

Complete the appropriate section(s) below.

CANCELLATION. A CANCELLATION OF ENROLLMENT INDICATES THAT THE STUDENT DID NOT ATTEND CLASSES FOR THE TERM INDICATED.

The student is entitled to a full refund of the charges for the term. No grades or records for the term will be maintained. If the student does not intend to return to Creighton, please enter "none" in the box "Expected return term".

EFFECTIVE TERM/YEAR _____

Authorized by: _____ Expected return term/year: _____

TERM WITHDRAWAL. A TERM WITHDRAWAL INDICATES THAT THE STUDENT ATTENDED DURING THE TERM BUT IS WITHDRAWING FROM ALL CLASSES BEFORE THE END OF THE TERM.

The student may be entitled to a partial refund of the charges for the term according to the published refund schedule of the University. All grades for the term will be listed as "W".

EFFECTIVE TERM/YEAR _____ Last date of attendance: _____
(MM/DD/YYYY)

Date student notified CU of intent to withdraw: _____

Authorized by: _____ Expected return term/year: _____

TEMPORARY WITHDRAWAL. A TEMPORARY WITHDRAWAL IS A PLANNED INTERRUPTION IN A STUDENT'S EDUCATIONAL PROGRAM WITH THE INTENT TO RETURN.

Semester temporary withdrawal will begin (term, year): _____

Semester student intends to register for and resume attendance (term, year): _____

E-mail address while on temporary withdrawal: _____

Authorized by: _____ Date: _____

PERMANENT WITHDRAWAL. A PERMANENT WITHDRAWAL INDICATES THAT THE STUDENT HAS INFORMED US HE/SHE DOES NOT INTEND TO PURSUE FURTHER ENROLLMENT AT CREIGHTON.

EFFECTIVE TERM/YEAR _____ Last date of attendance: _____
(MM/DD/YYYY)

Date student notified CU of intent to withdraw: _____

Authorized by: _____

FOR OFFICE USE:

Date Processed: _____ **BY:** _____