



Course Withdrawal Form

Name: _____
Last First

UNI: _____

Class: LL.M. Expected Graduation Date: _____

Summer 2021 Term Withdrawal Rules

W: This notation is made on the transcripts of students who withdraw from a course before **1/3rd** of the class meetings.

F: This notation will be recorded for a withdrawal after the **1/3rd** time period.

Course Number: _____ Title: _____

Instructor Name: _____ Term: _____ Year: _____

Instructor Signature Date

Office of Graduate Degree Programs Signature Date

Student's Signature Date Submitted

YOU MUST MAINTAIN RESIDENCY FOR YOUR DEGREE PROGRAM TO BE CONSIDERED A FULL-TIME STUDENT.