



GRADUATE SCHOOL
COMPLETE WITHDRAWAL FORM



If you have received financial aid or a scholarship, please contact the [Office of Scholarships & Financial Aid](#) before withdrawing from the University.

First Name: _____ Home Phone: _____

Middle Name: _____ Business Phone: _____

Last Name: _____ E-mail: _____

Student ID #: _____ Semester of Withdrawal: _____
Spring, Summer I or II, Fall

I would like to withdraw from the following courses: Year: _____

Course Prefix (Ex., ENG)	Course Number	Section Number	Credit Hours

Permanent Address:

Local Address (only if different from permanent):

Reason(s) for
Withdrawal:

Student Signature

Date

Please return this form to the Graduate School for Processing via one of the options below:

Email: Wanda Underwood (underwoodw@uncw.edu), please use your UNCW e-mail address when sending.

Fax: 910-962-3787 (please contact us before faxing a form over)

US Mail: UNC Wilmington Graduate School
 601 S. College Rd.
 Wilmington, North Carolina 28403-5955