



Graduate Withdrawal Form

Complete this form and return it to the Center for Graduate Studies to withdraw from your NMT graduate program. Complete the withdrawal from at the Registrar's Office to drop/withdraw from each of your classes. Grades will be assigned per catalog policy.

Student Information

Student Name: _____ Student ID: _____ Term: _____

Permanent Email-Address: _____

Permanent Mailing Address: _____

Phone Number: _____

Signature: _____ Date: _____

You remain responsible for all charges, tuition, and fees associated with your courses.

Reason for withdrawal *(check all that apply and provide additional information below or attach documentation)*

Academic Issue: Which department: _____

Instructor Conflict: Which Instructor: _____

Work Related Issue
____ Job change/transfer
____ Schedule change/conflict

Financial Aid Issue
____ Lost scholarship
____ Not enough aid

Medical Issue
____ Personal
____ Family

Family Issue

Military Obligation

Explanatory Details:

Additional Information or Staff Followup:

Signatures

Academic Advisor: _____

Date: _____

Department Chair: _____

Date: _____

Graduate Dean: _____

Date: _____