



PART-TIME UNDERGRADUATE WITHDRAWAL FORM

STUDENT ID:	DATE:	SEMESTER:	YEAR:
LAST NAME:	FIRST NAME:	MIDDLE INITIAL:	
Degree/Program (check one): <input type="checkbox"/> BA <input type="checkbox"/> BFA <input type="checkbox"/> BMUS <input type="checkbox"/> BS <input type="checkbox"/> Non-Matriculated			

This signed form is used for course withdrawals after the Add/Drop period. It must be submitted to the Registrar's Office no later than the date stated on the Academic Calendar. After that date, the grade will automatically become an F.

Course & Section #	Course Title	Instructor

*If withdrawing from an internship, Career Services approval is required below.

Refund eligibility is determined by the published refund schedule

REQUIRED SIGNATURES:

Instructor: _____ Date: _____

Advisor: _____ Date: _____

Career Services (If Internship Withdrawal) _____ Date: _____

<i>I agree to abide by all policies and procedures as stated in Manhattanville College's publications including payment of all charges and collection fees.</i>	
Student: _____	Date: _____

**WITHDRAWAL IS NOT PROCESSED UNTIL THIS FORM IS RECEIVED BY THE
MANHATTANVILLE COLLEGE REGISTRAR'S OFFICE**

♦ Brownson Hall Room 113 ♦ 2900 Purchase Street ♦ Purchase, NY 10577 ♦
♦ Phone: 914-323-5337 ♦ Fax: 914-323-5211 ♦