

## Instructions

Please fill in the requested information below. The instructor's signature for each course is required to complete the adddrop/withdrawal process.

## Name:

	First	Middle	Last
Student ID:	School:	Term/Yr:	International Student: Yes 🗆 No 🗆

## **Drop** $\Box$ **Complete Term Withdrawal** $\Box$

Subject	Catalog Number	Section	Course Title	Undergrad 6-Drop	Credit Hours	Grade	Instructor's Signature
				□ Counts □ Exempt			
				□ Counts □ Exempt			
				□ Counts □ Exempt			
				□ Counts □ Exempt			
				□ Counts □ Exempt			

Student Status (check if applicable)	Applicable Grades:
Yes □ No □ Student wishes to withdraw from all classes this semester.* Date:	W, WF—SON, MDA-
Yes $\Box$ No $\Box$ Student is resigning permanently from the institution.* Date:	SHP WP, WF—SOD Adv Ed,
*The student's official drop date, is the date the student submitted the drop form.	GSBS
University Refund Policy per Title 3. Higher Education	W—SPH, SBMI, SOD
As per education code Sec. 54.006. I understand only withdrawals/resignations submitted	DHy

As per education code <u>Sec. 54.006</u>, I understand only withdrawals/resignations submitted during the <u>refund period</u> will be eligible for a refund. I have reviewed the <u>refund schedule</u>. I

understand <u>100% refunds</u> are not issued after the first-class day even if a student's specific classes start after that day. I understand if I am on a payment plan, I am still responsible for the original tuition and fee charges and even if I resign during a refund period, I may still have future payments due on my plan. I understand there may be serious impact from this action if I receive any type of financial aid including grants, loans, or scholarships. The Financial Aid Office will be notified regarding my withdrawal/resignation from classes.

My signature below certifies I have read and understand the University Refund Policy.

Signatures		
Student's Signature:	Date:	
Faculty/Academic Advisor:	Date:	
Student Affairs:	Date:	
Student Affairs (if needed):	Date:	
International Affairs:	Date:	

Registrar's Office:

For questions, please email <u>registrar@uth.tmc.edu</u> or call 713-500-3388.