Indiana State University Withdrawal Authorization Form

To officially withdraw from all classes at ISU, please complete this form and submit it as follows:

Undergrad Students

Email to Regemail1@indstate.edu
Fax to (812)237-8039
For additional questions, please
contact our office at (812)237-2020

Graduate Students

E mail to ISU-GradStudy@mail.indstate.edu
Fax to (812)237-8060
For additional questions, please
contact our office at (812)237-3005

Student Name_____ **Student ID** _____-_____-_____
Last **First** **MI**

Current Address _____ _____ ___ _____
street **city** **state** **zip**

Phone # _____ **E-mail Address** _____

Date Withdrawal Initiated _____ **Term** _____ **Number of Credit Hours Enrolled** _____

Check the PRIMARY reason for your decision to withdraw from Indiana State University:

___Academic (A)
___Course Availability (CA)
___Employment (E)
___Financial (FD)
___Health / Medical (H)
___Military (with orders) (M
___Never Attended (NA)
___Other (OT) _____
___Personal (PE)
___Transfer to another school (T)
Which School? _____
Semester and year you plan to return to ISU _____

Do any of the following benefits apply? Y / N Check all that apply:

___Graduate Assistantship – Please notify the department awarding your assistantship of your intent to withdraw.
___Financial Aid Consortium between ISU / Ivy Tech
___Financial Aid Received
___Veteran Benefits Received – Contact 812-237-2020 to understand how the withdrawal will affect your current benefits.
*___ICN Courses-where? _____
*___International Student
*___Student Athlete
* **Withdrawal request will not be processed without departmental approval.**

Please read each item carefully and initial that you understand the terms and conditions: **Initials**

I understand that even though I am withdrawing from ISU, I am responsible for all outstanding financial obligations to the University. _____

I understand that if I live in the residence halls, it is my responsibility to meet with Residential Life and complete any required paperwork. _____

Withdrawal from classes may impact financial aid. You are encouraged to contact Financial Aid to understand exactly how your withdrawal will affect your financial aid eligibility now and into the future and your overall financial responsibility to ISU. _____

For grade and refund information, please refer to http://www.indstate.edu/registrar/Interest_to_students.html **and click on** Important Term Dates.

I understand I am withdrawing from all of my classes in which I am currently enrolled:

Student Signature _____ **Date** _____

05/05/10