



Withdrawal Notice

Student ID #	Last Name	First Name	Telephone	Date

CRN	Course	Sec.	CR/AU	Title	Instructor Name	Instructor Signature

Note to Instructor/Dean: The student named above will be withdrawn from the course(s) with a "W".

Student Signature _____ Dean(s) signature _____

FOR DEAN'S OFFICE USE ONLY:

Student is withdrawing from ENMU-Roswell for the following reason(s):

<input type="checkbox"/> Transportation problems	<input type="checkbox"/> Health problems	<input type="checkbox"/> Dissatisfied with material. (please explain)
<input type="checkbox"/> Military obligations	<input type="checkbox"/> Childcare problem	<input type="checkbox"/> Dissatisfied with online course(s). (please explain)
<input type="checkbox"/> Financial Reasons	<input type="checkbox"/> Other family obligations	<input type="checkbox"/> Other reason (please explain)
<input type="checkbox"/> Moving from area	<input type="checkbox"/> Dissatisfied with instructor. (please explain)	
<input type="checkbox"/> Conflicting work hours		

Please use the space below to provide additional details about the situation: _____

FOR ADMISSIONS AND RECORDS OFFICE USE ONLY:

Processed by: _____ Processed date: _____

Backdated to date initiated Complete withdrawal