SACRED HEART UNIVERSITY
CLASS WITHDRAWAL FORM

Withdrawals must be completed by the eighth week of a semester (or the proportional equivalent for accelerated/intensive terms). Deadlines are found on the academic calendar on the website. Please check the deadline prior to completing this form.

Name:_____ Student ID#:_____

Course Number and Section:_____ Term and Year:_____

Students will not receive academic credit for a withdrawn course and are encouraged to consult with their Academic Advisor or Program Director prior to withdrawal. Instructor signatures are required. Course withdrawals may affect satisfactory academic progress (as defined in the catalog) and may result in the loss of benefits or permission to participate in University activities or athletics, and may also delay graduation. It is the student's responsibility to understand these consequences.

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- **Are you a veteran? _____Yes _____No (No additional signature required)**
- **Are you an athlete? _____Yes _____No (If yes, please obtain signature below)**
  Note: Athletes must maintain full time status—a minimum of 12 credits.

_____/_____
Athletic Compliance Office Date

_____/_____ _____/_____
Professor's Signature / Date Student's Signature / Date

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Please return completed form to the Registrar's Office—students remain registered until the completed form is received.

NOTE: If this form is completed and submitted within the deadline and a refund is applicable, the refund will be based on the date of initial contact with the Registrar's Office, not the date the student stopped attending the course.

***Office Use Only: Date Returned:*_____**

Rev. 9/10