

Name \_\_\_\_\_ ID# \_\_\_\_\_ Semester \_\_\_\_\_

Not staying full time (attempting less than 12 credits in a semester – 9 for graduate students) may affect financial aid and campus housing. It is the student’s responsibility to be aware of the implications this withdrawal may have on eligibility for various types of financial aid and eligibility for campus housing.

**Complete and return this form to the Registrar’s Office no later than the deadline date.** Consult the academic calendar, available on the web, for the deadline.

**Important Notice for International Students:** You are required by U.S. Government regulations to inform a Designated School Official PRIOR to dropping below full time status (12 credits for undergraduates, 9 credits for graduates). Failure to do so may jeopardize your current visa status and/or your ability to obtain a U.S. visa in the future. Please contact the Office of International Program and Services ([international@purchase.edu](mailto:international@purchase.edu) or 914-251-6032) before submitting this form.

***I WOULD LIKE TO WITHDRAW FROM THE FOLLOWING COURSE:***

I will still be taking \_\_\_\_\_ credits after this withdrawal

**CRN#**

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\_\_\_\_\_ Course Title \_\_\_\_\_ Date

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\_\_\_\_\_ Course Title \_\_\_\_\_ Date

<p>Your signature is required. In signing this you are stating that you are aware of how this may impact your eligibility for financial aid and on-campus housing.</p> <p style="text-align: center;">_____ Student Signature      Date</p>	<p>An Advisor signature is <b>required</b>.</p> <p style="text-align: center;">_____ Advisor Signature      Date</p>
<p><b><i>For students going from full time to part time status:</i></b> The student has met with a financial aid advisor and has been made aware of possible changes in their financial aid eligibility and any potential charges they may incur on their semester bill.</p> <p style="text-align: center;">_____ Financial Aid Adv.      Date</p>	<p style="font-size: 48px; font-weight: bold;">X</p> <p style="text-align: center;">_____</p>

**Athletes** must have this form signed by the Athletic Director or designee:

\_\_\_\_\_  
Athletic Director or designee      Date

**Check your grades on myHeliotrope to verify that the W grade has been processed.**