College of Arts & Sciences Late Withdrawal Application for a Course Never Attended Date Received in Office_____

Use the back of this form or attach a written statement explaining the reason for your request.

		Student ID#		ID#
ollege	<u> </u>	Major		
ocal Address				
ocal Phone Nur	mber	E-ma	ail	
semester and Ye	ear of Never Att	ended course		
Course(s) Neve	r Attended		12.00	
Department Name		Section Number	Credit Hours	Instructor
nstructor Signa Date	tureOffic		Print Nar	
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