

VERMONT TECH

Office of the Registrar

WITHDRAWAL FORM

Prior to withdrawing from Vermont Tech, please discuss this decision with your advisor, counselor, parent(s), guardian(s) and/or significant other.

Today's Date: _____

Student name: _____ ID: _____

Current program: _____ Campus: _____

I hereby petition to withdraw from Vermont Technical College and drop all currently enrolled classes. I understand that if this petition is made after the 60% point of the term, I will receive earned/failing grades and may not be entitled to tuition reimbursement. A medical leave of absence after the 60% point will require written supporting documentation for this request from a physician or medical practitioner. Briefly explain the reason(s) for this withdrawal:

(Advisor/counselor signature)

(Print name)

(Date)

(Student signature or parent signature, if student is under age 18)

Please meet with or contact each of the following, and return this form to the Registrar's Office.

1. Center for Academic Success/Advising & Retention _____
(Name & date)

2. Financial Aid: ☐ Exit interview

3. Residence Life/Housing:

- Student ID: ☐ Returned or N/A _____
(Name & date)

Registrar's official use only:

Business Office: ☐ Account set

Date of last academic event

☐ Unofficial withdrawal/date of determination of status change

☐ Grades/status set

(Signature & date)