Southeastern Oklahoma State University

OFFICIAL COMPLETE WITHDRAWAL FORM

SEMESTER/YEAR:

☐ Fall ☐ Spring ☐ Summer Year: _____

STUDENT ID NUMBER:

_____ / _____ / _____

FULL NAME:

_____

Last (Include II, Jr., Sr. etc.) *First* *Middle*

PERMANENT MAILING ADDRESS:

_____

Street *City* *State* *Zip* *Telephone*

Course Prefix	Course Number	Section Number	Course Length (Full-term or Block?)	Time	Days	Credit Hours

Reason for withdrawing: _____

_____

Do you plan to re-enroll at SE next semester? ☐ Yes ☐ No

I understand that I am *responsible for any financial charges* that I currently owe to the university. I am aware that if I received Title IV funds or certain VA tuition payments for this semester, I may be required to return all or part of those funds upon withdrawal. I understand that if I live on campus, I must complete a separate housing cancellation process with Housing & Residence Life.

X_____

STUDENT SIGNATURE (***Required)*** Date

REQUIRED SIGNATURES

_____

FINANCIAL AID (Admin-107) Date

_____

BUSINESS OFFICE (Admin-208) Date

*Amount Currently Owed:*_____

_____

STUDENT AFFAIRS (Student Union 312) Date

For students with a Dean's Hold only.

Do you live on campus? ☐ Yes ☐ No

If yes, Housing & Residence Life signature required.

_____

HOUSING & RESIDENCE LIFE (Student Union-308) Date

Do you receive VA benefits? ☐ Yes ☐ No

If yes, Veteran's Service signature required.

_____

VETERAN'S SERVICE (Admin-100) Date

_____

REGISTRAR'S OFFICE (Admin-100) Date

(Withdrawal is not official until processed in the Registrar's Office.)

DROP PERIOD: ☐ No Grade Record ☐ Automatic "W"

STATUS UPDATE: ☐