



**Office of the Registrar**  
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<b>OFFICE USE ONLY</b>
Date Recorded: _____
Recorder Initials: _____

## COURSE WITHDRAWAL

- The last day each semester for students to withdraw from a course is published in the Academic Calendar; the calendar is available online.
- The Office of the Registrar will enter a grade of “W” when the complete form is submitted.
- Reduced credit loads usually causes additional time and/or expense to complete a degree.
- Withdrawal from a course can affect a student’s financial aid, campus housing, and eligibility for athletics.
- Students in the US on an F-1 student visa must meet with the Office of International Programs (in Drexel Hall) prior to withdrawing from a course.

<b>Student Name:</b> _____	
<b>Student ID:</b> _____	<b>Academic Level:</b> <input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate
<b>Academic Year:</b> _____	
<b>Semester:</b> <input type="checkbox"/> Fall Semester (15 wk) <input type="checkbox"/> Fall Session I (7 wk) <input type="checkbox"/> Fall Session II (7 wk)	
<input type="checkbox"/> Spring Semester (15 wk) <input type="checkbox"/> Spring Session I (7 wk) <input type="checkbox"/> Spring Session II (7 wk)	
<input type="checkbox"/> Summer Semester (15 wk) <input type="checkbox"/> Summer Semester (10 wk)	
<input type="checkbox"/> Summer Session I (7 wk) <input type="checkbox"/> Summer Session II (7 wk)	
<b>E-mail:</b> _____	

<b>COURSE INFORMATION</b>	
<b>Course Code:</b> _____	<b>Section:</b> _____
<b>Title:</b> _____	<b>Faculty Name:</b> _____
<b>Faculty Signature:</b> _____	<b>Date:</b> _____

<b>ACKNOWLEDGEMENT</b>	
By my signature below, I accept responsibility for the accuracy of all information on this form. I understand the possible negative effects of withdrawing from a course.	
<b>Student Signature:</b> _____	<b>Date:</b> _____