Revised 7/27/2009

CHAMINADE UNIVERSITY OF HONOLULU
3140 WAIALAE AVE., HONOLULU, HAWAII 96816-1578

WITHDRAWAL FORM

Withdrawals prior to the established deadline for each semester may be made without grade penalty. Students in the Undergraduate Program may Withdraw Without Record from a course until the last day of week five of a 15-week semester. Students in the Adult Evening and Online Program may Withdraw Without Record until Wednesday of Week 3 of a 10-week term. **WNR** grade will be posted to the record. Withdrawal from a course after the last day of withdrawal without record will be noted as a **W** grade on a student's transcript. A student who fails to withdraw officially will receive an **F** grade at the end of the term. There will be no refund of tuition if withdrawal is completed after the published refund deadline.

It is the student's responsibility to complete the withdrawal form and to submit it directly to the Records Office located on main campus. Completed withdrawal forms may be faxed to the Records Office at (808) 735-4777.

STUDENT:

_____

LAST NAME FIRST MIDDLE INITIAL ID NUMBER

_____

ADDRESS CITY STATE ZIP CODE PHONE NUMBER

PLEASE CHECK THE FOLLOWING: (Day students to obtain signatures)

Have you received Financial Aid while at Chaminade? Yes_____ No_____
Financial Aid Office:_____Date:_____

Have you received VA Benefits for this course? Yes_____No_____
VA Certifying Office:_____Date:_____

COURSE:

_____ _____

DEPARTMENT/ COURSE NUMBER/SECTION TERM/YEAR

_____

INSTRUCTOR

(NOTE: Please have the instructor sign the form below and give the date. If you are unable to contact the instructor, please notify the Chaminade Advisor or the Records Office immediately. Written evidence of extenuating circumstances must be submitted as justification for post-deadline withdrawals, i.e. doctor's note, military orders, etc.)

_____ _____
SIGNATURE OF STUDENT DATE

_____ _____
SIGNATURE OF INSTRUCTOR DATE

UNDERGRADUATE DAY ONLY- OBTAIN THIS SIGNATURE:
ACCELERATED UNDERGRADUATE REQUIRES SIGNATURE OF ADVISIOR.

_____ _____
SIGNATURE OF ADVISOR DATE

WITHDRAWAL AFTER DEADLINE REQUIRES ASSOCIATE PROVOST SIGNATURE:

_____ _____
SIGNATURE OF ASSOCIATE PROVOST DATE

Records Office Use Only: Date Received_____Grade Awarded**:**_____