

LENOIR-RHYNE UNIVERSITY

COURSE WITHDRAWAL FORM

Must be completed in its entirety

Student-Athletes Require Additional Signature by Athletics Compliance Coordinator

1. Completed by Student *Must obtain Professor's signature (preferably digitally)*

Student ID #: _____ Sport (if applicable): _____ Date: _____

Student Name: _____

Term (Check One): Fall _____ Spring _____ Summer _____

Course: _____ Section #: _____ Grade: (W, WF, WP) _____

Professor's Signature: _____

By signing this form, I understand that withdrawing from a course can affect billing, financial aid, VA benefits, visa status, housing eligibility, academic progress toward my degree and/or athletics eligibility. I understand that the withdrawal is not official until the date it is received by the Enrollment Services Center on the 1st floor of Lohr Hall.

Student's Signature

2. Completed by Advisor/Program Coordinator

Withdrawal Approved by: _____

*****Only required of Athletes***** Completed by Compliance Coordinator

REQUIRED FOR ALL STUDENT-ATHLETES

All student-athletes are required to maintain at least 12 credit hours (undergrad) or 9 credit hours (grad) of active enrollment at all times.

Athletics Department Approved by: _____

Compliance Coordinator Signature

Date