## **Registration Office**

## REQUEST FOR OPEN UNIVERSITY COURSE WITHDRAWAL

Students may withdraw from an Open University course with the College of Professional and Global Education (CPGE) through the 5<sup>th</sup> day of instruction without the instructor's approval and without the course being recorded.

Students may withdraw from an Open University course from the 6<sup>th</sup> day of instruction through the end of the 2<sup>nd</sup> week of instruction with the <u>instructor's approval</u>, and will be assigned a *W* grade.

Students with a <u>serious and compelling</u> reason may request to withdraw from one or more Open University courses from the beginning of the 3<sup>rd</sup> week of instruction until the end of the 5<sup>th</sup> week of instruction. Withdrawals under this provision require the approval of the instructor and the <u>CPGE Director of Business Operations.</u>

Students with supporting documentation as evidence of reasons of withdrawal that are *beyond the student's control* may be granted a withdrawal from the beginning of the 6<sup>th</sup> week until the end of the finals week for the requested quarter. Withdrawals under this provision require the <u>approval of the CPGE Director of Business Operations or the Dean of College of Professional and Global Education.</u>

ame:			Bronco No.		Contact Pho	one:
ame: Last	First	M.I.				
ddress:			E	mail Address:		
ity:			s	tate:		Zip:
	WITHDRAWING FR ce is needed, pleas				nd appropriat	te documentation. If
) I intend to m	ing to withdraw from A					<i>I</i> .
				ithdrawn from the clas		Instructor Signature
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) I intend to m O.U. Class #	aintain my enrollment f	or this quart	er but request to be w	ithdrawn from the clas	sses listed below	Instructor Signature
O.U. Class # (CRN)  I certify that all does not alter t	Subject/Number (i.e BIO 121)	Units Units herein is corfor refunds.	Instructor  Instructor  rect and complete and I am aware of the imp	Last D  I understand that apact of dropping enrolli	ate Attended  proval obtained to ment below 12 ur	Instructor Signature (Required after 1st Week) to withdraw from classes nits to a student who

•	including any supporting documentation, and based on this information:					
<ul> <li>( ) Approved for W grade(s) Please forward to CPGE Registration Office for processing</li> <li>( ) Denied – Based on the information provided, I am denying this request.</li> </ul>						
Comments:						
Signature:	Date:					
eason for Class Withdrawal (continued from re	everse side if needed):					
	Advice for completing this request:					
performance in the class, the student	ompleted sufficient work in the class to permit the instructor to evaluate the student's need not withdraw from the course, and the instructor may submit a grade on the class grade					
stop attending classes before this requ	nout receiving all signatures and submitting this request to the CPGE Registration Office. If you uest is approved, you may be assigned a grade that negatively impacts your GPA. rawing from classes. Be prepared to attach documentation to support your reasons for					
<ul><li>Meet with your instructor(s) to discuss</li><li>Submit this form to the CPGE Director</li></ul>	nentation you provide will be kept confidential.  Is your reasons for class withdrawal and request an evaluation of your work to date.  It is one cases, you may be asked					
<ul><li>to meet with this individual.</li><li>Once the request has been approved</li></ul>	or denied, you will be notified via email regarding the status of your request.					
For CPGE Registration Office us	e only:  Forward to: CPGE Director of Business Ops. □ Dean of CPGE □					

Request Approved:

Refund Eligible: Yes □

No