Salim Habib University
Course Withdrawal Form – Without "W" / With "W"

Registration No:	**Name:**	
Semester: ☐ **Fall** ☐ **Spring** ☐ **Summer**	**Program:**	**Class / Sec:**
☐ Morning ☐ Weekend	Date:_____/_____/_____	**Contact #:**

COURSE (S) TO BE WITHDRAWN: ☐ **Without "W"** (up to 10th week of semester) ☐ **With "W"** (up to 15th week of semester)

S.No.	Course Code	Course Title	Instructor's Name	Reason of Withdrawal & Instructor's Recommendations	Instructor's Sign
1.					
2.					
3.					

I understand that:

- The course being withdrawn will be offered by the University in accordance with the curriculum requirement and not necessarily in the forthcoming Semester. The course(s) may be offered in summer subject to availability of minimum number of students required to run the class.
- No fee will be refunded or adjusted for the course being withdrawn and fee is to be paid again when enrolling the said course.
- In case the, said course is prerequisite of any other course of the forthcoming Semester, that course will not be offered to me.
- I might have to enroll for an extra semester to complete my degree requirement due to any reason arising from withdrawal of the course.

Student's Signature: _____ Date:_____

Remarks of Chairperson

Approved ☐ **Not Approved** ☐

Signature of the Chairperson: _____

Note: A consolidated list of students is to be forwarded (by the Chairperson office) to the Dean of Faculty and COE for information and further action after the entry of said data in the CMS.

Student's Receipt for Withdrawal Course(s)
(Particulars to be filled by the student)

Registration No. _____ Name: _____

1. No. of courses withdrawn without "W" _____
2. No. of courses withdrawn with "W" _____

_____
Receiver's Signature & Stamp