

Withdrawal Form

Name _____ UC _____
UC Student ID Number _____ Date of Birth _____
Home University _____
Forwarding Address _____

Phone _____ Email _____

I am presently attending _____ Fall _____ Winter _____ Spring 20 _____ (check one)
I am leaving _____ (date)
I will complete (check one) I will not attend next term (check one)
_____ Fall _____ Fall
_____ Winter _____ Winter
_____ Spring _____ Spring
or
_____ I must return home immediately

1. I have contacted an international exchange officer / academic advisor at my home university and have been informed of any academic or financial penalties that I will be subject to as a result of my decision to withdraw from the UC Education Abroad Program.
YES _____ NO _____
2. I have made arrangements to leave my on-campus or off-campus housing and understand all associated fees that must be paid.
YES _____ NO _____
3. I have made arrangements to pay all fees on my UC student billing account (i.e., telephone, library, campus miscellaneous fees, etc.). Your UC transcript may be blocked if you leave an unpaid balance on your student account.
YES _____ NO _____
4. Please explain why you must withdraw from participation in the Program. Use the back of this page or attach a copy of the withdrawal notification you sent to your home university.

Student Signature _____ Date _____

UCEAP Advisor Signature (if applicable) _____ Date _____

International Office Advisor Signature _____ Date _____