Academic Affairs (if required)

REGISTRAR'S COPY

SOUTHERN UNIVERSITY - BATON ROUGE

ALL THE ABOVE SIGNATURES MUST BE ON FORM BEFORE PROCESSING. STUDENT IS WITHDRAWN ONLY AFTER REGISTRAR'S OFFICIAL VALIDATION. FORM IS NOT TO BE USED FOR DROPPING CLASSES.	Y AFTER REC	DENT IS WITHDRAWN ONL	ORM BEFORE PROCESSING. STUD	ALL THE ABOVE SIGNATURES MUST BE ON FO NOT TO BE USED FOR DROPPING CLASSES.	ALL THE ABOVE SIGNOT TO BE USED FO
/Date	Registrar	/Date	Financial Aid	/Date	Housing
/Date	Auxiliary Services	/Date	Retention Center	/Date	College/ School Dean
/Date	/ Female	/ / Male /	/ Other	/ / Graduate	/ / Senior
Student's Signature			/ / Junior	/ / Sophomore	Classification / / Freshman
Year:		Semester			State zip
			City		Number and Street
		Reason for Leaving			Mailing Address
1 1 - 1 1 1 1	-	/ /	First MI		Last
udent ID Number	and / or Stu	Social Security Number and / or Student			Name
		WITHDRAWAL NOTICE	WITHDRAV		