OFFICE OF THE REGISTRAR

1423 N. Jefferson Avenue Springfield, MO 65802 (417) 269-8374 Fax: (417) 631-0999 Registrar@coxcollege.edu



WITHDRAWAL FROM COX COLLEGE

POLICY AND INSTRUCTIONS

In order to be withdrawn from Cox College and any enrolled courses, a student must complete and submit this form. Not attending courses and/or verbally expressing an intent to withdraw does not automatically withdraw you.

Prior to submitting this form, students should first notify their Advisor and/or Program Chair. Students should also visit with the VA Certifying Official or the Financial Aid Office if receiving VA benefits or Title IV Financial Aid. After withdrawal, students may still be responsible for all existing financial responsibilities such as tuition, fees, and return of Title IV aid funds. (See college catalog and academic calendar deadlines for details.)

If students withdraw from the college prior to a semester start or during the drop/add period, courses will be dropped. Afterwards, courses will be withdrawn with a "W" (Withdrawn) grade through the initial withdrawal period. During the final withdrawal period, courses will be withdrawn with a "WP" (Withdrawn Passing), "WP" (Withdrawn Non-progressing), or "WF" (Withdrawn Failing) grade submitted by the course instructor(s). No form received by the Office of the Registrar after 5 PM on the final deadline will be processed. (See the Academic Calendar for withdrawal deadlines.) It is the student's responsibility to follow up with his/her advisor and program chair to ensure that the form is submitted to the Registrar by 5 PM on the final deadline. If this form is received after the final withdrawal deadline, the student may be withdrawn after the last day of the current semester.

If you want to withdraw from the college at the end of a semester after completing your courses, this form will be processed after the last day of the semester. You will need to indicate this below.

Notice: Dismissed students may be administratively withdrawn from the college without their request or required consent.

STUDENT INFORMATI	ON		
Name (First, Middle, Last)			
Phone Number	Campus Email Address		
Major/Degree Program			
Reason for withdrawal:			
☐ Financial	☐ Family	☐ Medical	
☐ Dissatisfaction with Cox College	☐ Career Path Change		
STUDENT SIGNATURE			
I understand that my electronic signature carries the same legal weight and authority as my written signature.			
Student Signature		Date College ID	
COLLEGE OFFICIAL S	IGNATURES		
Advisor	Cha	air/Program Director	
VA Certifying Official	Re	ceiving benefits (Yes or No)	
Financial Aid Official	Re	eceiving aid (Yes or No)	
Bursar	An	nount student owes \$	
	Year:	Registrar/Assistant Registrar Signature:	
☐ Copy of Form submitted☐ Collected Student's ID b		□ Ccmail-Withdrawn sent	
U Collected Student's ID b	auge:	☐ Enter Withdrwal date in NSLDS	