## MEREDITH COLLEGE 3800 Hillsborough Street Raleigh, NC 27607

## GRADUATE STUDENT WITHDRAWAL FORM FULL NAME \_\_\_\_\_ ID # \_\_\_\_ PERMANENT ADDRESS \_\_\_\_\_ (List forwarding address if you are moving) Home Phone No. \_\_\_\_\_ Work Phone No. \_\_\_\_ I entered Meredith through the Graduate Studies Office in \_\_\_\_\_ (month/year) in the Master of \_\_\_\_\_\_ program. Are you enrolled in classes this semester? \_\_\_\_\_ Were you enrolled in classes last semester? \_\_\_\_\_ I wish to withdraw from school as of \_\_\_\_\_ (last day of class attendance) Remember: you must be in good social, financial and academic standing to receive grades and transcripts from Meredith College. Student Signature Date

Date

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The single major reason I am withdrawing from Meredith College is: