



Registrar's Office
 1407 14 Avenue NW Calgary, AB T2N 4R3
 Tel: 403.284.7634 Fax: 403.284.7644
 registrar@auarts.ca

Undergraduate Studies: Withdrawal from University

This form will be completed by students who have decided to discontinue their studies at AUArts. See the back of this page.

Student Information

Student ID:	Student last name:	Student first (or chosen) name:	
Street / Box address:	City:	Province:	Postal code
Phone number:	AUArts email address:	Program / Major:	

Withdrawal Details

Semester from which you are withdrawing: <input type="checkbox"/> Fall 20____ or <input type="checkbox"/> Winter 20____ When you withdraw, your current course registrations (if any) will be graded 'W'. You will be withdrawn from your future semester course registrations. Note: Students who stop attending classes and fail to officially withdraw from the University will be assigned "F" grades.	
Are you planning to return to AUArts at a future date? <input type="checkbox"/> No <input type="checkbox"/> Yes	Semester:
Do you have a government student loan? <input type="checkbox"/> No <input type="checkbox"/> Yes	Loan:
Are you a sponsored student? <input type="checkbox"/> No <input type="checkbox"/> Yes	Sponsor:

I understand that,

1. I am financially responsible for my course registrations, even though I do not intend to complete them.
2. If I have an outstanding balance I will not be officially withdrawn until all tuition and fees are paid. This means all accounts must be in good standing before I am permitted to withdraw.
3. Any refunds which may be made will be calculated at the basis of the date of the university withdrawal, not the date I stopped attending classes.

Student's signature:	Date:
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Office Use Only

<input type="checkbox"/> Copy to Library	<input type="checkbox"/> Copy to Financial Aid	<input type="checkbox"/> RO: Holds/Conditions Cleared	<input type="checkbox"/> RO: ID Card returned
RO: UPass issued to student? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Withdrawal Term:	<input type="checkbox"/> Week 1-2	<input type="checkbox"/> Course registration status: DD	<input type="checkbox"/> General Studies: CA
	<input type="checkbox"/> Week 3-9	<input type="checkbox"/> Course registration status: WD	<input type="checkbox"/> General Studies: WD
	<input type="checkbox"/> Week 10-15	<input type="checkbox"/> Course registration status: WW	<input type="checkbox"/> General Studies: WD
Inactive Next Term:		<input type="checkbox"/> Course Registration ER	<input type="checkbox"/> General Studies: IS
Official Withdrawal Date:	Entered by:	Date:	<input type="checkbox"/> Inactivate email (SPAIDEN)
<input type="checkbox"/> SFB advised	<input type="checkbox"/> CTS advised	<input type="checkbox"/> Faculty advised	<input type="checkbox"/> Locker/ID card advised
Eligible for refund? <input type="checkbox"/> No <input type="checkbox"/> Yes	Amount:	Approved:	Date approved:

Action Plan

Prior to withdrawing from your University studies, your action plan outlines the steps you will take to make the best decision about your academic future. Consider contacting the following offices for assistance and support.

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| <input type="checkbox"/> Speak with my Professor(s) | <input type="checkbox"/> Student Awards Advisor
Awards@AUArts.ca | <input type="checkbox"/> Counselling@AUArts.ca |
| <input type="checkbox"/> Student Academic Advisor
Advising@AUArts.ca | <input type="checkbox"/> Tutoring@AUArts.ca | <input type="checkbox"/> Off campus counselling services |

Reasons for Withdrawal

1. Would you like to share a reason or reasons for your decision to withdraw from the University (academic, financial, personal, family, professional...).

2. Please share what you most like about AUArts.

3. What would you have liked to be different at AUArts?

4. I would stay if this happened:

5. Have you considered taking a Leave-Of-Absence? Under which circumstances would you return to AUArts?

6. Is there anything else you would like to add?