



Official Withdrawal Request

Office of the Registrar
101 Bresee Hall
Hartwick College
Oneonta, NY 13820
Tel: 607-431-4460; Fax: 607-431-4260

For office use only:

Process Date:

Processed By:

To request a withdrawal from Hartwick College, please complete this form and return it to the Registrar's Office. This form may be dropped off, mailed, or faxed. If you are requesting a withdrawal while attending classes, you will be dropped from those classes effective the date this form is submitted and issued grades based on current grading policy.

Note: Academic dismissal, expulsion and suspension supersede withdrawal

Name: _____ Date: _____

Hartwick ID #: _____ Advisor: _____

Email address: _____ Phone (in case of questions): _____

Graduation Date: _____ Submit Date: _____

Please check below to indicate you are requesting an official withdrawal from Hartwick College. Please list an effective date. If there is no date listed, the submit date will be used.

Official Withdrawal Effective Date: _____

Please describe your reason for withdrawing:

If you are transferring to another institution, please list the name of that institution below:

Prior to submitting this form, please follow the steps below and check items as they are completed:

- Consult with and inform your parents and/or guardians your intent to withdraw (if applicable);
- Notify your advisor and/or coach of your intent to withdraw;
- Complete an exit interview with the Dean of Assessment and Retention; and
- Review the policy and procedure for readmission should you choose to return.

I certify that the above information is accurate and the above steps have been completed.

Student's Signature

Date

Registrar's Signature

Date