

this course.

## **Course Withdrawal** Online & Graduate Programs

OFFICE OF THE REGISTRAR 5000 DEER PARK DRIVE SE, SALEM, OR 97317-9392 503-375-7017 | 503-585-4316 fax

Stu	udent's Last Name	(please print)	First Name	(please print,	Student ID#
Со	urse withdrawing from:				
Со	urse Number	Section Number _		Instructor _	
Cre	edits				
Re	ason for withdrawing				
ls t		are enrolled in this semest		□ Yes	
	UTION: Before you dro anging your schedule.	op any course, contact <u>fin</u>	ancialaid@co	rban.edu to ເ	understand the financial ramification of
		you are withdrawing fro ges and you are still resp			thed add/drop date. Policy states there will to f tuition.
to me	return to Corban University or make payment a	ersity a portion of the ref	und you hav nancial Servi	e received. Yo	d you qualify for and may result in having ou will be required to repay the overpay- hin 45 days, or have the federal aid over-
	I have read the above state	ment			
	I have consulted with my ac	dvisor			
	I am a Corban athlete and h	nave contacted the FAR – Facul	ty Athletic Rep.		
Stu	udent Signature:				Date:
CC	OURSE WITHDRAWAL	INSTRUCTIONS:			
1.	Refer to your program calendar for course withdrawal dates. Determine if the withdrawal falls within the deadline for course withdrawal if it is after the withdrawal date, the Registrar's Office will not be able to process this request.				
2.	If you are participating in Corban athletics, contact the FAR-Faculty Athletic Rep regarding eligibility				
3.	Submit completed form t	o: registrar@corban.edu			
4	Pay the withdrawal fee o	nline <b>HFRF</b>			

5. Once the form is submitted and the course withdrawal fee has been paid you will then receive a letter grade of "W" on your transcript for