



West Virginia University
 INSTITUTE OF TECHNOLOGY
STUDENT WITHDRAWAL INFORMATION

Name: _____

Semester: _____

Student ID Number: _____

REASON FOR WITHDRAWAL

(Please, check only one reason):

- ___ Academic Difficulty (01)
- ___ Insufficient Financial Resources (02)
- ___ Medical Problems (03)
- ___ Personal (04)
- ___ Lack of Interest (05)
- ___ Dissatisfied with Course/Instructor (06)
- ___ Dissatisfied with this College (07)
- ___ Desired Courses not Available (08)
- ___ Career Plans Uncertain (09)
- ___ Employment/Job Conflict (10)
- ___ Transfer (Name of Institution) _____ (11)
- ___ Administrative Withdrawal (12)
- ___ Other: Please Specify _____ (13)

___ Military – A review with the Registrar’s Office withdrawal professional is advisable with regard to a military withdrawal. To process a full refund, we will need a copy of the student’s activation papers. (14)

OTHER CONSIDERATIONS

Are you an International Student? Yes No

If yes, what visa type: _____

Currently receiving financial aid? Yes No

Have you received student loans while enrolled at WVUIT?
 Yes No

Do you live in Tech housing? Yes No

Residence Hall: _____

Move out date: _____

Do you plan to return to WVU Tech? Yes No

If yes, what term? _____

CONFERENCE

Conference with Advisor and Dean in your program of study.

Dean – College of Business, Humanities, & Sciences

Dean – Leonard C. Nelson College of Engineering

 Advisor Signature

 Chemistry Dept. Signature-Returned lab key and manual

 Dean BHSS/LCNCEs Signature

 Dean of Students Signature

SIGNATURE REQUIRED

I understand the following: 1) Any financial obligation due to WVUIT such as tuition, housing charges, chemistry laboratory breakage, library book fines, parking fines, etc., **MUST** be paid prior to withdrawal. 2) If I am contracted with WVUIT housing, I am required to vacate and return my keys within 24 hours of withdrawal. 3) My Student ID Card will be deactivated within 24 hours of withdrawal. 4) I should file a personal information change form if any of my contact information is changing.

Student Signature: _____ Date: _____

Return completed form to the Registrar’s Office in Benedum.

Office Use Only:

Type of Withdrawal: EW SW DD

SEVIS Processing? Yes No Completed: _____

VA Processing? Yes No Completed: _____