



Plymouth State University
of the University System of New Hampshire
Office of the Registrar

WITHDRAWAL Form

For use by Full-time
UNDERGRADUATE students only

Date:	
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Name (Please print)

Student ID#

Last	First	M.I.	
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Course(s) to be withdrawn from:

CRN	Course ID	Title	Cr.	Signature of Instructor	Date

Signature of Student

Date

****Note****

Withdrawals will be granted from the Drop deadline through the 10th Friday of the semester and remain on the transcript with a grade of W.

Withdrawals requested after the 10th Friday of the semester may be granted only under extenuating circumstances. For more information on those circumstance please see the current academic catalog.