



Student I.D. Number

Last Name (print clearly)

First

Middle

TERM: Fall Spring Summer YEAR: _____

DIVISION: Undergraduate Graduate CAPS
(check one)

NOTE: Failure to attend class is not sufficient notice to the University of withdrawal in order to qualify for a refund, and may result in a punitive grade of "VF" (failure to officially withdraw).

Dropping a class may affect your Financial Aid/Scholarship status. Please check with the Office of Financial Aid, 513 745-3142, Schott Hall. Contact Office of the Bursar, 513 745-3435, 135 Alter Hall for a refund of any money.

DROP/WITHDRAWAL:

| Required: CRN | Subject Area | Course Number | Section Number | Enter "AU" to Audit | Class Title or Reason for drop | Credit Hours | Days | Time | Office Use Only |
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ADD:

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Student's Signature

Current Phone Number

Date

Instructor's Signature (EDME, MILS, PHYS withdraw) Date

Advisor's Signature (undergraduate students only) Date

Signature of Student's Dean (when required) Date

| Dean/Office Use Only - Amount of Refund | | | | | | |
|---|----|----|----|----|-----------|----------------|
| 100% | 80 | 60 | 40 | 20 | No Refund | Not Applicable |
| Office of the Registrar Authorization: | | | | | | |