

Office of the University Registrar

COURSE WITHDRAWAL FORM

This form is for students who wish to withdraw from a course during a quarter. This form must be completed for each course students withdraw from during a quarter (from the first day of classes to the last day of classes). Lack of participation in a class does not constitute due notice of withdrawal. For withdrawal from all classes in quarter or a degree program, use the quarter or program withdrawal form.

Date: \_\_\_\_\_

Name: \_\_\_\_\_

(Please print)

Address: \_\_\_\_\_

Street, City, State, Zip

Email: \_\_\_\_\_ Phone \_\_\_\_\_

I am enrolled in \_\_\_\_\_ (degree program) and I am requesting to be withdrawn from,  
(Course name and number) \_\_\_\_\_  
during the \_\_\_\_\_ Quarter, \_\_\_\_\_ (year)

REASON FOR WITHDRAWAL: (Please check all that apply)

- |                                       |  |  |
|---------------------------------------|--|--|
| A ___ Need time off to work           | B ___ Financial Problems                 | C ___ Course(s) I wanted not available           |
| D ___ Program/course(s) too difficult | E ___ Program /course(s) not challenging | F ___ Not enough academic support from professor |
| G ___ Difficulty with professor       | H ___ Student Service problem            | I ___ Medical reasons                            |
| J ___ Other (describe briefly)        |  |  |
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Additional Comments or reason(s) for withdrawal (use extra sheet if necessary):

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Last day of attendance \_\_\_\_\_, date withdrawal process was initiated \_\_\_\_\_

I understand that I must clear all outstanding financial obligations and that, until the Registrar's Office has been notified of such clearances, transcript will not be available.

STUDENT SIGNATURE: \_\_\_\_\_ Date \_\_\_\_\_

Thank you.

Please return to:

The Registrar  
University of Philosophical Research  
3910 Los Feliz Blvd.  
Los Angeles, CA 90027

REGISTRAR: \_\_\_\_\_ Received Date \_\_\_\_\_

**University of Philosophical Research - 3910 Los Feliz Boulevard, Los Angeles, CA 90027-0299  
Phone 1.800.548.4062 or 323.663.2167 - Fax 323.663.2051**

**E-mail the Administration Office: [admin@uprs.edu](mailto:admin@uprs.edu)**

**Email the Registrar: [registrar@uprs.edu](mailto:registrar@uprs.edu)**