

REQUEST FOR LATE WITHDRAWAL

This form is to be used for students requesting a Late Withdrawal from a course or courses that are within the NJCU School of Business (Accounting, Economics, Finance, Management and Marketing) departments after the official deadline that is posted by the Registrar's Office has passed.

Date: _								
Student Name:				ID # <u>:</u>				
Phone:	hone:				NJCU Email:			
Major/Inte	nded Major:							
Semester	Course Catalog # (3 digits)	Course Section # (4 digits)	Course Title		Instructor's Name	Credits		
Documentation Required: Attach a typed document (medical documentation if appropriate) providing the reason for your request. Note 1: Please reference the undergraduate/graduate withdrawal policies within the university catalogs on how to withdraw (medical withdraw) from a course or courses during the semester. For additional information on a W grade and its effects financially or academically, refer to the university catalog. Note 2: Submission of this form from students NJCU email account constitutes an official request and that one has read and understand this document and process. Approval of this request is at the discretion of the Dean's Office, School of Business or designee.								
FOR DEAN'S USE ONLY: APPROVED DENIED ADDITIONAL INFO REQD								
COMMENT	ΓS:							
Dean, School of Business/Designee – Date								

Copy to: Registrar office for processing, Student NJCU email, EAB Form effective start date Fall 2020