

**VALPARAISO UNIVERSITY – THE GRADUATE SCHOOL
WITHDRAWAL CARD – CHANGE IN REGISTRATION**

STUDENT ID: _____ **DATE:** _____

NAME: _____
LAST NAME FIRST NAME

COURSES WITHDRAWN:

Dept.	Course #	Section	Credits	Instructor's Signature
Total Credits Dropped:				Total Registered Credits After Change:

Adviser's Signature: _____ **Date:** _____

Approval for student athletes with less than full time status: _____

After securing appropriate signatures, **RETURN THIS CARD TO THE GRADUATE SCHOOL.**