NOTE TO STUDENTS:

All drops must be done via NEST, unless a student has a hold on their account.

It is the student’s responsibility to be aware of any credit load restrictions that are associated with special programs, financial, benefits, athletics, etc.

Date of withdrawal is the date of receipt within the Office of the Registrar or the U.S. postmark for those received through the U.S. mail.

It is the student’s responsibility to be aware of specific withdrawal and refund deadlines.

Refunds and or adjustments will be processed by the Student Accounts Office.

<table>
<thead>
<tr>
<th>CRN</th>
<th>SUBJECT</th>
<th>COURSE</th>
<th>SECTION</th>
<th>COURSE TITLE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>EX. 44520</td>
<td>WRIT</td>
<td>105</td>
<td>01</td>
<td>College Writing I</td>
</tr>
</tbody>
</table>

Please indicate your intentions below, if you are withdrawing from all courses.

☐ Leave of Absence  ☐ Withdrawal from Montclair State University  ☐ Not Applicable

By signing this form, I hereby authorize the Office of the Registrar to process my withdrawal.

STUDENT CWID

Print Name: ________________________________

Student Signature: __________________________ Date: ______________________

Do not write below this line. Office use only:

________________________________________________________________________

Processed by: __________________________ Date Processed: __________________________

Staff Initials: __________________________ Revised 9/2020