

## Withdrawal from GSAS

IThis form must be completed by the student and submitted via email to gsas-studentaffairs@columbia.edu

LAST NAME:	FIRST NAME:			CUID/F	PID: <i>C00</i>	[refer to SSOL]
M F COLUMBIA (UNI) EMAIL ADDRESS:		NON-COLUMBIA EMAIL ADDRESS:				
MAILING ADDRESS:				TELEPH	IONE:	
ALTERNATIVE MAILING ADDRESS:	ALTERNATIVE TELEPHONE:					
MA only MA/MPhil/PhD	DEPARTMENT OR PROGRAM:			ICLS		
SEMESTER AND YEAR OF SEMESTER AND YEAR OF FIRST REGISTRATION IN GSAS: RECENT REGISTRATION IN					LAST DATE OF CLASS ATTENDANCE (MM/DD/YYYY):	
HAVE YOU APPLIED FOR OR RECEIVED FEDERAL LOANS TO PAY FOR ANY PART OF YOUR GRADUATE EDUCATION AT COLUMBIA?		ARE YOU CURRENTLY IN UNIVERSITY HOUSING?			CITIZENSHIP OR VISA STATUS:	
PLEASE INDICATE THE SEMESTER, YEAR, AND REASON FOR ANY LEAVES OF ABSENCE:						

Please explain the reason for your withdrawal. You may fill out a separate sheet to scan and include if needed.

The GSAS withdrawal policy is available at <u>gsas.columbia.edu/content/withdrawal</u>. I certify that I have reviewed and understand the withdrawal policy on the GSAS website.

Student signature:	Date:			
FOR OFFICE USE ONLY				
REGISTRAR				
INTERNAL DATABASE				
TTD DATABASE				
□ NOTE	LETTER TO STUDENT			
HOLD	RECEIVED IN OSA (DATE)			