

**NOTICE TO THE REGISTRAR OF  
INTENTION TO WITHDRAW**

**NAME:** \_\_\_\_\_ **STU. ID #** \_\_\_\_\_

**I am withdrawing from Nyack College.**

**My last date of class attendance was** \_\_\_\_\_  
month                      day                      year

**I will be leaving the dorms as of** \_\_\_\_\_  
(For Res. Life purposes)                      month                      day                      year

<b>Tuition Refund Schedule for Students Who Withdraw from Nyack College:</b>	
By the end of the registration period .....	100% refund
By the end of the second week .....	80% refund
By the end of the third week .....	60% refund
By the end of the fourth week .....	40% refund
By the end of the fifth week .....	20% refund
More than five weeks .....	no refund

**\*NOTE: WITHDRAWAL FROM COLLEGE MAY JEOPARDIZE STUDENT ELIGIBILITY FOR FINANCIAL AID,  
SCHOLARSHIPS, ATHLETICS AND COLLEGE-OWNED HOUSING.**

<b>Reason(s) for withdrawing: (check as many as apply)</b>	
<input type="checkbox"/> <b>Change of vocational intention</b>	<input type="checkbox"/> <b>Transferring to</b> _____
<input type="checkbox"/> <b>Financial problems</b>	<input type="checkbox"/> <b>Dissatisfaction with Nyack College</b>
<input type="checkbox"/> <b>Marriage</b>	<input type="checkbox"/> <b>Other (please explain</b> _____
<input type="checkbox"/> <b>Health</b>	_____

**I DO NOT expect to return to Nyack College.**

**I DO expect to return to Nyack College for the** \_\_\_\_\_ **semester.**

**I have read the above Tuition Refund Schedule and \*Note.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(Required)

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

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**FOR OFFICE USE ONLY:**  
Exit Interview with Registrar: \_\_\_\_\_  
Comments:

Online \_\_\_\_\_ Stat Trkg \_\_\_\_\_ W/D list \_\_\_\_\_ Enter Grades (WD) \_\_\_\_\_

Copies to: SFS \_\_\_\_\_ STU DEV \_\_\_\_\_ Memo to: Advisor \_\_\_\_\_ Housing \_\_\_\_\_ Nurse \_\_\_\_\_ TAP Assessor \_\_\_\_\_  
(NY State)