

THE UNIVERSITY OF THE PERMIAN BASIN

WITHDRAWAL PETITION FALL SPRING SUMMER YEAR _____

NAME _____ STUDENT ID _____
 (Please print)

ADDRESS _____
 Street City State Zip Tel.NO.

MAJOR _____ GRAD _____ UNDERGRAD _____

REASON FOR WITHDRAWAL REQUIRE:

- | | | |
|---|--|-----------------------------------|
| <input type="checkbox"/> Illness | <input type="checkbox"/> Work | <input type="checkbox"/> Military |
| <input type="checkbox"/> Personal Reasons | <input type="checkbox"/> Relocating | <input type="checkbox"/> Other |
| <input type="checkbox"/> No Reason Given | <input type="checkbox"/> Foreign Aid Service | |

STUDENT'S SIGNATURE _____ DATE _____

In order to insure your eligibility to re-enroll at a later date and /or make sure that your records are clear and that no "hold" is presently on your records, please obtain the following signatures. WITHDRAWAL-ALL the signatures listed below must be obtained before the petition can be processed. PROPERTY DEPOSIT REFUND- obtain signatures only from Financial Aid and Library.

FINANCIAL AID _____ DATE _____ CLEAR _____ NOT CLEAR _____

LIBRARY _____ DATE _____ CLEAR _____ NOT CLEAR _____

ACCOUNTING _____ DATE _____ CLEAR _____ NOT CLEAR _____

POLICE _____ DATE _____ CLEAR _____ NOT CLEAR _____

If Student's record is not clear, please advise the Registrar's Office immediately (Phone: (552-2635))

 TO BE COMPLETED BY REGISTRAR'S OFFICE

FEES PAID:	TEXAS EDUCATION CODE 54.006. MAY 1977						
REFUND RATE (%)	REFUND AMOUNT						
Tuition	_____	100	80	70	50	25	0
Building use fee	_____	100	80	70	50	25	0
Student Services	_____	100	80	70	50	25	0
Lab Fee	_____	100	80	70	50	25	0
Parking	_____	100	80	70	50	25	0

COURSES

Course Number

Approved by Registrar's Office _____ Date- _____

 COMMENTS: _____