



OFFICE OF THE REGISTRAR

o. (201) 684-7695 | f. (201) 684-7956
e: reg@ramapo.edu | ramapo.edu/registrar

COURSE WITHDRAWAL FORM

Only use this form if you are UNABLE to withdraw yourself on Web Self-Service due to certain holds.

Student Information

Last Name: _____ First Name: _____

R# _____ Ramapo Email: _____@ramapo.edu

Course Information

Fall Winter Spring Summer Year: _____

<u>CRN</u>	<u>Course Section ID</u> (ex. BIOL 101-01)	<u>Course Title</u>	<u>Credits</u>

Note: These courses will appear on your transcript with a grade of W.

Additional Information:

- This form will not be accepted after the withdrawal deadline posted on the [Academic Calendar](#).
- Students are encouraged to discuss this withdrawal with their advisor.
- If you are receiving financial aid, you should check with the Office of Financial Aid prior to withdrawing as your financial aid status may change.

SIGN HERE

➔ Student's Signature: _____ Date: _____

Registrar Use Only

Initials: _____ Date: _____

Rev. 1/25