

TO BE COMPLETED BY THE STUDENT	
Last Name:	First Name:
AU ID Number:	Email Address:
Phone Number:	Program:

Please complete all **applicable** sections, sign, and submit as below.

A. Course Withdrawal

Please withdrawal my registration(s) for the following course(s):

Course 1:	Instructor:	Term:
Course 2:	Instructor:	Term:
Course 3:	Instructor:	Term:
Course 4:	Instructor:	Term:

All withdrawals are subject to a substantial **Graduate Student Withdrawal fee** (mandatory). Any fees will be charged to your account prior to processing any applicable refunds. Please familiarize yourself with all fees and regulations prior to submitting any paperwork. See your [program site](#) for details.

****CAUTION: Only complete section B if you are permanently leaving your program.****

B. Program Withdrawal

Please indicate your reason for leaving your program.

I understand:

I am choosing to withdraw from my graduate studies program at Athabasca University in good standing, and that if I wish to reapply, **I am required to complete the entire application process**. I am required to review all applicable regulations on the AU website prior to submitting this form.

I can inquire about taking a [1-year deferral from my program](#), but choose not to pursue this route.

If I have begun work with practicum/clinical courses or site set-up, I am responsible for contacting the [Practicum Administrator](#) to alert them to the withdrawal **prior to submitting this form**.

C. Signature (Required)

Student Signature

Date

Please submit this form along with any questions to the [Graduate Administrative Assistant](#).