

SEMESTER/YEAR:

- Spring _____
- Mini _____
- Summer I _____
- Summer II _____
- Fall _____



TODAY'S DATE: _____

Office of the Registrar – Records
 601 University Drive, JCK III
 San Marcos, TX 78666
 (512) 245-2367 Fax: (512) 245- 8126

OFFICIAL WITHDRAWAL FORM

Please print or type.

Student Name: _____		Student ID Number: _____																	
<i>Last</i>	<i>First</i>	<i>MI</i>																	
Permanent Address: _____																			
<i>Street:</i>		<i>City:</i>	<i>State/Zip:</i>																
Permanent Phone: _____	Cell Phone: _____	Email Address: _____																	
<p>The official withdrawal from Texas State University will only be processed using this official form. Withdrawals for Financial Aid recipients will NOT occur until authorized by the Financial Aid & Scholarships Office. Please circle the primary reason for withdrawal.</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 25%;">00 – Unknown/Other _____</td> <td style="width: 25%;">04 – Employment Conflict</td> <td style="width: 25%;">08 – Lack of Study Skills</td> <td style="width: 25%;">12 – Changed Major</td> </tr> <tr> <td>01 – Medical Problem</td> <td>05 – Transportation Difficulties</td> <td>09 – Academic Problems</td> <td>13 – Transfer to New School</td> </tr> <tr> <td>02 – Financial Difficulties</td> <td>06 – Military</td> <td>10 – Teacher Conflict</td> <td>14 – Conduct Problems</td> </tr> <tr> <td>03 – Family Problems</td> <td>07 – Deceased</td> <td>11 – Lack of Prerequisites</td> <td>15 – Administrative Withdrawal</td> </tr> </table>				00 – Unknown/Other _____	04 – Employment Conflict	08 – Lack of Study Skills	12 – Changed Major	01 – Medical Problem	05 – Transportation Difficulties	09 – Academic Problems	13 – Transfer to New School	02 – Financial Difficulties	06 – Military	10 – Teacher Conflict	14 – Conduct Problems	03 – Family Problems	07 – Deceased	11 – Lack of Prerequisites	15 – Administrative Withdrawal
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03 – Family Problems	07 – Deceased	11 – Lack of Prerequisites	15 – Administrative Withdrawal																
Grade Information: Contact your instructor(s).																			
Refund Information: Contact the Student Business Services Office at 512-245-2544.																			
I understand that I have officially withdrawn <i>for the current semester only</i>.																			
SIGNATURE: _____		DATE: _____																	
FOR REGISTRAR'S OFFICE USE ONLY:																			
In Person: _____	Department Request: _____	Processed by: _____																	
By Email/Mail/Fax: _____	Cancelled Class: _____	Effective Date: _____																	
International Student: _____																			
DEPARTMENT OF HOUSING AND RESIDENTIAL LIFE																			
Students who currently reside in university housing need to contact the Department of Housing and Residential Life to arrange for a contract cancellation, due to withdrawal from the university.																			
FINANCIAL AID RECIPIENTS																			
Are you receiving any form of financial aid (grants, loans, work study)? *YES _____ NO _____																			
*If YES, you MUST have an interview with Financial Aid and Scholarships to discuss payment options and other alternatives. <u>You cannot withdraw without first contacting Financial Aid and Scholarships.</u> The following section pertains to repayment of Federal Financial Aid programs only. You may have other debts to the university that you are responsible for.																			
FAS OFFICE USE ONLY:																			
PROMISSORY NOTE:																			
In exchange for a good and valuable consideration, I promise to pay Texas State University – San Marcos the “Total Amount” indicated below. Such amounts are owed in accordance with federal aid rules and regulations due to my withdrawal from Texas State. I understand this is a promissory note and I have read and agree to all terms and conditions. This note is due and payable on the due date: it may be prepaid at any time without penalty. No interest will be charged if the note is paid in full on or before the due date. If not paid in full by the due date, the full amount is due and payable immediately. I promise to pay all reasonable collection costs, including attorney fees and other collection costs, necessary for the collection of any amount not paid when due. Collection fees will be an additional 33 1/3% of the total balance due. _____ (initial)																			
I and each maker, surety, and endorser on this note waive all notices, demands and presentation for payment, notices of intention to accelerate the maturity, protests, and notices of protest as to this note. The holder of the note may upon agreement with me, extend the note's due date or change the time or method of payment without notice to any other maker, surety, and endorser on this note. In such case, the other makers, sureties and endorsers will remain bound to repay the note.																			
Institutional Portion Owed \$ _____																			
Federal Portion Owed: \$ _____ (due within 45 days)																			
TOTAL AMOUNT DUE: _____																			
Agreed: _____		Interviewed By: _____																	
<i>Student Signature</i>	<i>Date</i>	<i>Financial Aid Staff</i>	<i>Date</i>																
Commit Date: _____																			