Notice of Withdrawal

TO BE COMPLETED BY STUDENT

Complete this Notice of Withdrawal form and return it via email to sps-studentwithdrawals@columbia.edu or fax it to 212-854-4101. **Failure to complete all sections of this form will significantly delay the withdrawal process.** A non-refundable, $75 fee is applied to all withdrawals. Please check your account on Student Services Online (SSOL) (http://ssol.columbia.edu) approximately one week after submission to either pay your bill or to request a refund.

You may pay your bill either online through SSOL or send checks, payable to **Columbia University**, to **Columbia University, Student Account Payment, 210 Kent Hall, 1140 Amsterdam Avenue, New York, NY, 10027**. Please be sure to include your UNI or PID, also known as your C-number. If you are entitled to a refund, refunds are automatic for all School of Professional Studies programs except American Language Program and Auditors/Lifelong Learners. Students in the ALP or auditing programs should log-on to SSOL to request a refund after the withdrawal has been processed. For those who will receive an automatic refund and do not have direct deposit set-up, please log onto to SSOL to see where your check will be mailed to.

Master of Science students enrolled in both full term and partial term, online Business Certification courses are NOT ELIGIBLE for the partial term withdrawal refund schedules. Master of Science students who wish to add or drop partial term courses must do so during the Change of Program Periods associated with each of those partial terms. If students drop individual, partial terms courses after the partial term Change of Program Periods, **they will be responsible for the full tuition of the course**.

Are you a Federal Aid Recipient? ☐ **Yes** ☐ **No**

If "Yes," please indicate the type of program you participate in: ☐ **Title IV** ☐ **Title VII** ☐ **Both**

Please check all categories that apply to you: ☐ International Student ☐ Veteran ☐ CU Employee

Your program is (Please check one): ☐ On Campus Only ☐ Online Only ☐ On Campus & Online

Name: _____ School/Program: _____

UNI: _____ C-Number: _____

Columbia Email Address: _____ Alternate Email Address: _____

Permanent Address: _____

_____

This Withdrawal is for: Term/Year: _____ / _____ If Summer, please also indicate Session: _____

University Housing? ☐ Yes ☐ No   Dining Services? ☐ Yes ☐ No

Please check the most appropriate reason for withdrawal:

☐ Academic Difficulty	☐ Personal	☐ Required to Withdraw (academic)
☐ Employment	☐ Career Change	☐ Required to Withdraw (disciplinary)
☐ Financial Difficulty	☐ Transfer to outside University	☐ Unhappy Institutional Fit/Campus Climate
☐ Health	☐ Transfer within University	

☐ Other (please explain): _____

Student Signature: _____ Withdrawal Date: _____

(Last Date Attended Class)

OFFICIAL USE ONLY

Withdrawal Effective Date *(Last Day Student Attended Class)*: _____/_____/_____

Date of Determination *(Date SPS Was Notified)*: _____/_____/_____

Student Affairs Officer Signature: _____

Notes: _____

_____

School of Professional Studies | Office of Student Affairs
203 Lewisohn Hall, MC 4119 • 2970 Broadway • New York, NY 10027

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