

Withdrawal from the School of Divinity

Please Print		
Last Name:	First Name:	MI:
WFU ID Number:	Non-WFU email:	
My signature below indicates that I am	leaving Wake Forest University School of D	Divinity under the following circumstances:
Withdrawal/WD (WD - withdrawWithdrawal/Leave of Absence (L	ble (OI) prior to the start of the semester, might return) ging and not completing current semester, no pla blue V – leaving either during the semester or at the better detailing the personal, medical, or family r	end of the semester and planning to return
Affairs, Wingate Hall room 203B. I further a	cil acknowledged by the appropriate signatures cknowledge that I am responsible for any outsta or notifying other parties with interest in my wit	anding/unresolved debt(s) incurred during my
Student's Signature		Date
Academic Adviser in the School of Divinity	:	Date:
If enrolled at the time of Withdrawal, list of	ourses to be removed from:	
*Course & Section Number:	WD WP WF Instructor:	Date:
*Course & Section Number:	WD WP WF Instructor:	Date:
*Course & Section Number:	WD WP WF Instructor:	Date:
*Course & Section Number:	WD WP WF Instructor:	Date:
*Course & Section Number:	WD WP WF Instructor:	Date:
This form requires the signature of the	Associate Dean of Academic Affairs.	
SignatureAssociate Dean of Academic Affa	nirs	Date
If withdrawal is for leave of absence, i	ndicate so here (and attach required lette	r):
	es, to the Office of Academic Affairs (Wing (Initials indicate notice has been sent to these p	
Associate Dean of Admissions, Shonda	Jones: Z. Smit	h Reynolds Library, Circulation Desk:
Registrar's Office, 110 Reynolda Hall, T	rey Frye:	Financial Aid Office, Tom Benza:
Returned Deacon One Card, 104 Alumr	i Hall:	Financial & Accounting Services:

*Note: For WD or LV only: If this withdrawal is before the drop date of the semester, circle WD for withdraw without grade. If it is after the drop date of the semester, circle WP for withdraw-passing or WF for withdraw-failing.