

**Office of the Registrar**

304.865.6105 (office)

304.865.6001 (fax)



1 Campus View Drive, Vienna, WV 26105-8000

## STUDENT WITHDRAWAL FORM

Name: \_\_\_\_\_ Social security # \_\_\_\_\_

Home address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of withdrawal: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Last date attended: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Reason for withdrawal: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
*Registrar*

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
*Date*

\_\_\_\_\_  
*Advisor*

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
*Date*

\_\_\_\_\_  
*Dean of Faculty*

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
*Date*

\_\_\_\_\_  
*Dean of Students*

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
*Date*

\_\_\_\_\_  
*Financial Aid*

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
*Date*

\_\_\_\_\_  
*Perkins*

\_\_\_\_\_  
*Business Office*

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
*Date*

Students must complete a Room Condition Report, signed by Residence Hall staff, without damages in order to receive damage deposit.

OVU refund policy is published in the current catalog. Proration of institutional awards is based on percent of aid earned. Proration of room is based on percent of the semester you lived in the residence hall. This is calculated by dividing the number of days room was occupied (exit date on Room Condition Report) by the number of days in the semester. Board plans are non-refundable. **It is likely that OVU will be required to return federal funds and that you will owe OVU and will be responsible for paying back any loan amount that you earned.**

Student Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_