University of Maine at Machias
Semester Withdrawal Form

Student's Name: _____ DOB: _____

Address for Future Mailings: _____

_____

Students who are attempting to withdraw from all classes during a given semester, but who **intend to return** the following semester, should complete Section 1.

Section 1: I request permission to withdraw from all classes in which I am currently enrolled for the semester indicated: _____

Student Signature: _____ Date: _____

Advisor Approval: _____ Date: _____

Assistant Provost Approval:* _____ Date: _____

*Necessary only if student is requesting withdrawal after the semester withdrawal deadline. In this case, a letter explaining student's extenuating circumstances should accompany this form.

Students not intending to return to UMM should complete section 2 and meet or speak with a Student Success Advisor in the Advising Center, 2nd floor, Powers Hall.

Section 2: I request permission to withdraw from the University of Maine at Machias effective _____.

Student Signature: _____ Date: _____

Exit Interview Clearance: Student must meet or speak with and obtain the signature of the Student Success Advisor in the Advising Center, 2nd floor, Powers Hall, before the withdrawal will be considered official:

_____
Student Success Advisor Date

Students withdrawing from UMM entirely must return their UMM ID card to the Office of Student Life in Dorward Hall.

Please return this form to the Registrar's Office or Advising Center before leaving campus.

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