



Active Military Duty Request to Withdraw
(You will receive a copy of this request for your records)

1. Name: _____ 2. KUID/EMPLID: _____

3. Copy of Military Orders: _____ Yes _____ No (See Number 6 below)

4. Forwarding Address: _____

The address above is the one we will use to mail any future KU information or refunds.

5. E-mail address we can use to contact you: _____

6. If you do not have a copy of your MILITARY ORDERS or a FORWARDING ADDRESS, please mail or fax them to us in the next few days. In order to process this request we must have a copy of your orders.

Send to: Veteran Services
Office of the University Registrar
KU Visitor Center, 1502 Iowa St.
Lawrence, KS 66045
785-864-4423
785-864-3900 (FAX)

7. WITHDRAW from all classes? _____ Yes _____ No (If no, go to number 8.)

If YES, the following students must use a paper withdrawal form (if withdrawing on or after the first day of classes):

- Pharmacy
Undergraduate Engineering
Undergraduate Architectural Engineering
AEC
Law

The form can be found at (https://registrar.ku.edu/sites/registrar.ku.edu/files/service/docs/Withdrawal%20form.pdf). Once it has been signed by the Dean or Dean's representative of your School it must be submitted to the KU Visitor Center.

Withdrawal form completed, signed by Dean of Dean's representative attached? _____ Yes _____ No

All other students log into Enroll and Pay > Click on "Student Center" > Click on "Drop/Withdraw All Classes" > Select the appropriate term and follow the instructions.

8. I wish to WITHDRAW from the following CLASSES:

Table with 2 columns: CLASS, NOTES. Includes horizontal lines for input.

I wish to STAY ENROLLED in the following CLASSES:

Table with 2 columns: CLASS, NOTES. Includes horizontal lines for input.

9. Decisions about grading or incompletes are decisions made by the faculty on the basis of the work you have completed to date and the rules governing the course.

There is a full 100% refund for classes from which you withdraw and no adjustment for classes in which you remain enrolled, even if you are requesting a grade of incomplete in those classes.

10. If you have student financial aid, would you like for us to notify the Office of Student Financial Aid for you?

_____ Yes _____ No, I will contact Financial Aid myself. _____ Not Applicable

11. If you have a contract with Student Housing would you like for us to notify the Office of Student Housing for you?

_____ Yes _____ No, I will contact Housing myself. _____ Not Applicable

12. If you want to request a partial refund of your parking permit, please return it to Parking or give it to us and we will return it the Parking Department.

13. Is there anyone else at KU you would like us to contact on your behalf?

NAME: _____
OFFICE: _____
CONCERN: _____

14. When do you plan to return to KU? Spring _____ (year) Summer _____ (year) Fall _____ (year)

15. Would you like to remain/become a part of the email list? _____ Yes _____ No

16. Is it okay if we release your name and address to organizations wanting to send you care packages? _____ Yes _____ No

If yes, who can we contact to retrieve your deployment address?

Person: _____
Phone: _____
Email: _____

The Office of the University Registrar and Veterans' Services can assist you with your return to KU. Contact us as soon as you know when you'll be returning and we will help you with this process. If you will be gone from KU three semesters or more, you will need to contact the Office of Admissions to be readmitted.

Signature: _____ DATE: _____

Request received by: _____ DATE: _____

Office Use Only (Emails sent to:)

_____ Computer Center	_____ Residency
_____ Veterans Services	_____ OIRP
_____ Student Financial Aid	_____ Other (specify): _____
_____ Bursar's Office	_____ Other (specify): _____