

Withdrawal Billing or Refund Form

(Study Abroad Office Use Only)

Student's Full Name: _____

Student ID Number: _____

Program Term: _____

Date of Withdrawal: _____

Previously Charged:

Tuition _____

Fees _____

TOTAL _____

To Be Refunded:

Tuition _____

Fees _____

To Be Charged:

Charge/Refund Date Processed: _____ Initials: _____

Website Status Changed to "Withdrawn"

Date Processed: _____ Initials: _____