



# UCONN

# THE GRADUATE SCHOOL

WHETTEN GRADUATE CENTER | 438 WHITNEY ROAD EXTENSION, UNIT-1152, STORRS CT 06269-1152  
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## GRADUATE SCHOOL WITHDRAWAL FORM

FIRST NAME

LAST NAME

STUDENT ID # (SEVEN DIGITS)  NETID  PHONE \_\_\_\_\_

EMAIL \_\_\_\_\_

I am officially withdrawing from the University of Connecticut Graduate School in the following program(s):

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

I have attended class within the first 10 days of the semester. My last date of attendance was \_\_\_\_\_  
mm/dd/yyyy

Signature \_\_\_\_\_ Date \_\_\_\_\_

