

**MSSW PROGRAM
WITHDRAWAL FORM**

Date: _____

Student's Name: _____

UT ID# _____

Date of Enrollment: _____

Program (FT, ES, AS): _____

Number of semesters in attendance: _____

Number of credit hours earned: _____

Date of withdrawal: _____

Passing all courses: Yes No

Passing field: Yes No Not yet in field

Number of Incompletes: _____

Courses with grade of D or lower: _____

Current GPA: _____

Reason for withdrawal: _____

Anticipated date of readmission: _____

Conditions for readmission: _____

Approval Signatures:

Major Professor: _____

Date: _____

Program Director: _____

Date: _____