

Course Withdrawal Form



APPALACHIAN
— SCHOOL OF LAW —
OFFICE OF THE REGISTRAR

1169 Edgewater Drive
Grundy, VA
Fax: (276) 935-8261
registrar@asl.edu

■ Please complete all fields clearly and accurately

Student Name : Date of Request :

Email Address : Phone Number :

Course Name	Professor	Course Credits	Last Date of Course Attendance

Reason for Withdrawal (to be completed by student):

Student Signature/Date :

Chief Academic Officer/Date :