

Last Name:

Email Address:

First Name:

Current Program:

Student ID Number:

Phone Number:

Please withdraw me from the following course(s):

Course 1: Instructor: Start Date:

Course 2: Instructor: Start Date:

Course 3: Instructor: Start Date:

Course 4: Instructor: Start Date:

Once course registration is processed, the following regulations apply:

Early Withdrawal: I am withdrawing **prior to the course start date** OR **no later than one month after the course start date** and request a refund less the course withdrawal processing fee. Please note that this fee may be prorated for 1- and 2-credit courses. Any money will be refunded back to the original form of payment (E.g. credit card, government loan) after the course withdrawal request is processed.

Withdrawal after 30 days: I am withdrawing 30 or more days after the course start date and I am no longer eligible to receive a refund.

IMPORTANT:

- Please ensure that you have reviewed all applicable program regulations (relating to program status, re-registrations, and withdrawals), and have consulted an Academic Advisor with any questions prior to submitting your form.
- Students enrolled in a Faculty of Health Disciplines course are permitted one registration and one re-registration for each course. Subsequent registrations in the same course will require approval of the Graduate Program office.
- DO NOT RETURN COURSE MATERIALS. Once delivered, all course materials are the property of the student—no further refund will be awarded for returned materials.
- If currently in a clinical or practicum course, or you have submitted a Typhon Request Form for an upcoming placement, please send an email to the address below advising them that you are withdrawing from the program. This will ensure that your Typhon information is updated:

Nurse Practitioner: fhdyphonadmin@athabascau.ca**Counselling:** gcappracticumadmin@athabascau.ca

Please submit your completed form or any questions to us at:

NURSING & HEALTH STUDIES PROGRAMS

OR

COUNSELLING PROGRAMS

Email: cnhsgrad@athabascau.caEmail: gcapadmin@athabascau.ca

You will receive confirmation of form receipt—by email only—within 5 business days.

Student Signature_____
Date