



THE GRADUATE SCHOOL OF THE
**COLLEGE of
CHARLESTON**

GRADUATE PROGRAM WITHDRAWAL FORM

NAME: _____ CWID: _____

Graduate Program

- | | | |
|--|--|---|
| <input type="checkbox"/> MAT Early Childhood Education | <input type="checkbox"/> MA Bilingual Legal Interpreting | <input type="checkbox"/> MS Computer Science |
| <input type="checkbox"/> MAT Elementary Education | <input type="checkbox"/> MA Communication | <input type="checkbox"/> MS Environmental Studies |
| <input type="checkbox"/> MAT Performing Arts | <input type="checkbox"/> MA English | <input type="checkbox"/> CER Arts Management |
| <input type="checkbox"/> MAT Special Education | <input type="checkbox"/> MA History | <input type="checkbox"/> CER Bilingual Legal |
| <input type="checkbox"/> MEd Languages | <input type="checkbox"/> MS Mathematics | <input type="checkbox"/> CER Bilingual Medical |
| <input type="checkbox"/> MEd Science and Math | <input type="checkbox"/> MS Marine Biology | <input type="checkbox"/> CER ESOL |
| <input type="checkbox"/> Master of Public Administration | <input type="checkbox"/> MS Accountancy | <input type="checkbox"/> CER Communication |
| | | <input type="checkbox"/> CER Statistics |

I, _____, would like to withdraw from the graduate program (checked above) at the College of Charleston.

Reasons for request to withdraw from the program: _____

I understand that if I am currently enrolled in classes, I must officially withdraw from those classes through Cougartrail during the regular withdrawal period. If the withdrawal from classes takes place after the regular withdrawal period, I must complete a "Petition for Withdrawal from Graduate Course(s) After the Official Deadline" form in the Graduate School Office.

Student Signature: _____ Date: _____

Program Director Signature: _____ Date: _____

Graduate Dean Signature: _____ Date: _____

GSO Staff initial and date after change has been made in the computer _____ Date _____

*If the above is an ENGLISH or HISTORY student, please send a copy of this form to The Citadel: College of Graduate and Professional Studies, 171 Moultrie Avenue, Charleston, S.C. 29409. If the above is a PUBLIC ADMINISTRATION student, a copy of this form should also be sent to the University of South Carolina at .

CC: Graduate School CC: Program CC: Student