COURSE WITHDRAWAL (GRADUATE LATE WITHDRAWAL) REQUEST

For assistance, call 540-231-8636 or

e-mail grads@vt.edu

Use this form to drop a graduate course after the drop deadline. The dropped class will remain on the transcript, designated as a "WG," and will not compute in the GPA. Submit this form to your home department and then to the Graduate School for approval by the final Friday before the last day of classes.

Last/Family Name				First/Given Name			Middle Name	
Last 4 digit	s of VT ID:							
Last 4 digits of VT ID:								
E-mail Add	ress:							
		@vt.edu account, pr	eferred					
Current Pro	ngram						Degree Level	
							Doctoral Education Specialist	
Campus							Master's	
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STUDENT Signature Date (MM/DD/YY)								
INSTRUCTOR Signature				Printed Name			e-mail (@vt.edu, preferred)	Date (MM/DD/YY)
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	HEAD Signature GRADUATE PRO	GRAM DIRECTOR	Pri	Printed Name			e-mail (@vt.edu, preferred)	Date (MM/DD/YY)
DEPARTMENT CONTACT (GRADUATE STAFF COORDINATOR) Signature Date (MM/DD/YY)								
GRADUATE SC	HOOL Signature	2		Date (MM/DD		/DD/YY)		ompleted form:
							https://gs.vt.edu/forms	
							120 Graduate Life Cen	ter, Blacksburg
							VT ICAB 1 3625 Potomace A	We Alevandria

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