



Office of Records & Registration  
***Not Returning Form***

Student ID Number: \_\_\_\_\_

I, \_\_\_\_\_  
Last Name First Name MI

intend to complete the current semester at Dillard University. However, I will not return next semester.

Reason: \_\_\_\_\_

Student Home Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

City State Zip

Contact Number(s):

Home: \_\_\_\_\_

Cell: \_\_\_\_\_

Other: \_\_\_\_\_

Email Address: \_\_\_\_\_

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**PLEASE SECURE SIGNATURES IN THE ORDER INDICATED AND RETURN ORIGINAL FORM TO THE OFFICE OF RECORDS & REGISTRATION.**

1. Vice President for Student Success: \_\_\_\_\_ Date: \_\_\_\_\_

2. Associate Vice President for Academic Affairs: \_\_\_\_\_ Date: \_\_\_\_\_

3. Financial Aid & Scholarships: \_\_\_\_\_ Date: \_\_\_\_\_

4. Business & Finance: \_\_\_\_\_ Date: \_\_\_\_\_

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\_\_\_\_\_  
*Student Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Registrar / Director for Records & Registration*

\_\_\_\_\_  
*Date*