

## NOVA SOUTHEASTERN UNIVERSITY SHEPARD BROAD COLLEGE OF LAW

## WITHDRAWAL REQUEST FORM (Complete this form if you want to withdraw from the College of Law)

Student Name	NSU ID # N			
	(Last)	(First)		
Address				
	(Street)	(City)	(State)	(Zip)
Home Tel. (	)	Cell Number ( )		
Email				
Reason for wit	thdrawal:			
Reason for wh				
Semester of pe	ermanent withdrawal:			
* Student is responsible for all financial obligations owed to the university. It is the student's responsibility to contact the Office of Financial Aid to inquire on their financial record.				
Are you a scho	olarship recipient?	Yes	No	
	s form, student acknow road College of Law a			anently withdrawn from ion.

(Student Signature)