



# Total Withdrawal

208.524.3000 ext.4 phone – 208.525.7026 fax  
1600 S 25<sup>th</sup> E – Idaho Falls, ID – www.cei.edu

From all current classes at CEI

## Student Information

Date \_\_\_\_\_ SID# \_\_\_\_\_

Full Name \_\_\_\_\_ Phone \_\_\_\_\_

Mailing Address \_\_\_\_\_

Term Withdrawing From  Fall  Spring  Summer Year \_\_\_\_\_

## Withdrawing Anticipate Re-Enrollment or No Plans to Return

Term planned to return \_\_\_\_\_  Medical (Documents Attached)  No plans to return

## Select Any That Apply – Accepted Employment in Related Field of Study

Related  Non-Related – Employer Name & Phone Number \_\_\_\_\_

## Signatures

Student \_\_\_\_\_ Date \_\_\_\_\_

CEI Employee \_\_\_\_\_ Date \_\_\_\_\_

\* Computer lab fee and other fees are NOT refundable. \* All withdrawals will be charged a \$10 administration fee.

## CEI Office Use only

Date Entered Current Program \_\_\_\_\_ Last date of Attendance \_\_\_\_\_

## Refund by Week Registered for Math 100

Prior & 1<sup>st</sup> 100%  2<sup>nd</sup> 50%  3<sup>rd</sup> 25%  Later 0%  Yes  No If Yes Notify CCR

## Reason

Student Initiated  Never Attended  Probation  Suspension  Zero Credit

Registrar Office Comments:

## Financial Aid & Veterans Affairs

PERC  Yes  No

FA Comments:

FA Signature \_\_\_\_\_ Date \_\_\_\_\_

VA Signature \_\_\_\_\_ Date \_\_\_\_\_

## Business Office

Owed To Student \_\_\_\_\_ Owed From Student \_\_\_\_\_ PERC  Yes  No

BO Signature \_\_\_\_\_ Date \_\_\_\_\_

BO Comments:

Registrar's Signature \_\_\_\_\_ Date \_\_\_\_\_