

Non-Degree Seeking Undergraduate Withdrawal Form Return completed form to: Office of the Registrar: registrar-help@umd.edu Phone: (301) 314-8240 | Fax: (301) 314-9568

This form should only be used by non-degree seeking students to request a complete withdrawal from a semester. A withdrawal can be processed at any time between the first and last day of classes for the semester. Students must submit written notice of withdrawal to the Office of the Registrar no later than the last day of classes.

Degree seeking students should use the appropriate form found at the Office of the Registrar Undergraduate Withdrawal page.

Last Name:		First Name:		
UID:	Phone #:		Email:	
Year: Ser	mester: Fall	Spring		
Is your request to withdraw	related to COVID-1	19? Yes	No	
Brief summary of reason	seeking withdraw	al:		
Do you plan to return to the	University next se	mester? Ye	s No	
If "No" and you are register	ed for the next serr	nester, your re	gistration will be canceled.	
Statement of Understandi	ng:			
I hereby acknowledge that	am responsible fo	r all tuition and	d fees related to this semeste	r's enrollment
at the University of Marylan	eason seeking withdrawal: a to the University next semester? Yes No egistered for the next semester, your registration will be canceled. standing: e that I am responsible for all tuition and fees related to this semester's enrollment			
Student Signature:				Date:
Instructions on	how to digitally si	gn this docu	nent can be found <mark>here</mark> .	
			For Official Use O	nlv:

Semester Charge (FOR OFFICIAL USE ONLY)								
Refund:	80%	60%	40%	20%	0%			
Charge:	20%	40%	60%	80%	100%			

For Official Use Only:

Date:

Official: