

WITHDRAWAL NOTIFICATION

Student Name _____ SID # _____ Year Matriculated _____

Program M.Arch I M.Arch II M.E.D. Current Year 1 2 3

I hereby withdraw from enrollment in the Yale School of Architecture. I understand that if I wish to return to the School of Architecture at some point in the future I will need to reapply through the School's normal admissions process.

Student Signature _____ Date _____

REGISTRAR'S OFFICE

Last date attended classes, if known _____

Effective Date of withdrawal _____

Date of determination _____

Code _____

Processed by _____ Date _____

Signature of Registrar
