

**RICHARD BLAND COLLEGE
WITHDRAWAL FROM COLLEGE**

Student Name _____ Date _____

Student "R" Number (or last four digits of SSN) _____

Address _____
_____ Phone _____

Last date of attendance in class _____

NOTE: Since you are requesting to withdraw officially from the College certain steps are necessary. It is required that you report to the offices below to clear any outstanding debts to the college and obtain signatures of the appropriate officials. When you have done so, return this form to the Registrar's Office. The date this completed form is submitted to the Registrar's Office is the Official Date of Withdrawal from College. If you desire to return to the college, you must submit a Readmission Application to the Office of Admissions. The form is available on Admissions Office link of the college website, www.rbc.edu.

REASON FOR WITHDRAWAL: _____

Signature _____

Parent Signature _____

(If student is under 18 years of age)

Obtain signatures from the offices listed below.

Business Office _____ Library _____

Financial Aid Office _____ Veterans Affairs Office _____
(If Applicable) (If Applicable)

Residence Life Office _____
(If Applicable)

Registrar's Certification _____ Date _____

COMMENTS _____

WITHDRAWAL

White – Registrar's Copy

Canary – Student's Copy