



Note to Student
 Change is **NOT OFFICIAL** until this form is completed and sign by all departments indicated below.

Student Name: _____ **ID#:** _____ **Session:** _____

Home Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Home Phone No: () _____ **Cell Phone No:** () _____

Start Date: _____ **Program:** _____

LDA: _____ **Email:** _____

GPA: _____ **Credit Taken:** _____ **Credit Earned:** _____

Student Request

___ I am requesting to withdraw from _____ to _____

___ I am requesting to drop from NYADI on _____

___ I am requesting to transfer to another college _____

Reason for Drop/Withdrawal:

Steps to complete by Departments

Comments	Steps	Date	Initial
	1) Met w/Registrar		
	2) Met w/Student Services		
	3) Met w/ Bursar		
	4) Met w/ Dean (if applicable)		
	5) Registrar (rec'd completed form)		

 Student Signature

 Date