



LEBANON COLLEGE

15 Hanover Street, Lebanon, New Hampshire 03766 (603) 448-2445

Withdrawal Form

Date: _____

Student Name: _____

Social Security #: _____

Address: _____

City: _____ State: _____ Zip Code: _____

A. I am requesting withdrawal from the course I have registered for.

Course #: _____ Course Title: _____

Section: _____

B. I am requesting withdrawal from the following program:

Note: If withdrawing from a program you must:

1. Get permission of the Dean of Academics and Student Services;
2. Report to the Financial Aid office your official date of withdraw with a letter or this form. If you receive any Title IV funding, you will be responsible for any unpaid tuition or expenses to the college and repayment to the Department of Education.

Tuition Refund Policy

- Requests received **after** the third class: **NO REFUND.**

Signature