

To be used by full-time students wanting to withdraw from all courses in a term

PERSONAL IDENTIFICATION			
Student ID number		Date of Birth (mm-dd-yyyy)	Email
Last name (Family name) (Previous last name)		First name (Given name)	Middle name
Address		Home phone number	
City	Province	Postal code	Cell phone number

OSAP Recipient? Yes No International Student? Yes No

After the 10th day of the term no refund will be provided and student will be responsible for paying any outstanding balances on their account. Please submit this form along with your student card to the Office of the Registrar.

PROGRAM INFORMATION		Year in Program	Semester (i.e. 3)	Term
PROGRAM (MAJOR)	CAMPUS	<input type="checkbox"/> Year 1 <input type="checkbox"/> Year 2 <input type="checkbox"/> Year 3 <input type="checkbox"/> Year 4		<input type="checkbox"/> Fall <input type="checkbox"/> Winter <input type="checkbox"/> Summer

STATE SPECIFIC REASONS FOR WITHDRAWAL

- | | |
|---|--|
| <input type="checkbox"/> Financial reasons | <input type="checkbox"/> Personal |
| <input type="checkbox"/> Offered employment | <input type="checkbox"/> Health |
| <input type="checkbox"/> To attend another school | <input type="checkbox"/> To attend another program at Georgian |
| <input type="checkbox"/> Difficulties with program | <input type="checkbox"/> To return home |
| <input type="checkbox"/> Wrong program fit/not the right program for me | <input type="checkbox"/> Other |

ADDITIONAL INFORMATION: _____

FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT: In accordance with Section 39(2) of the Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c. F.31, this is to advise you that your personal information is collected under the legal authority of the Ontario Colleges of Applied Arts and Technology Act, 2002. This information may be used and/or disclosed for administrative, statistical and/or research purposes of the college and/or ministries and agencies of the government of Ontario and the government of Canada, including, but not limited to, tabulating and reporting data on Key Performance Indicators (graduation rate, graduate employment, graduate satisfaction and employer satisfaction). You may also be contacted by ministry- or college-authorized third parties for your voluntary participation in surveys to evaluate student and graduate experiences and outcomes. Information will also be shared with third party service providers who are retained by the college to provide services to students or act as agents of the college (working in accordance with privacy guidelines). Georgian is required to report student level enrolment-related data to the Ministry of Training, Colleges and Universities under the authority of the Ontario Colleges of Applied Arts and Technology Act, 2002, S.O. 2002, Chapter 8, Schedule F, Section 6.

I certify that the above information is true and complete. I have read and understand the Freedom of Information and Protection of Privacy Statement.

DOMESTIC REQUIREMENTS	INTERNATIONAL REQUIREMENTS
Signature of Student _____ Date _____	Signature of Student _____ Date _____
Signature of Program Co-ordinator _____ Date _____	Signature of Counsellor _____ Date _____
Signature of Counsellor _____ Date _____	Signature of International office _____ Date _____

For Office Use Only	
Registrar/Designate _____	Date _____
Effective Date: _____	Refund Approved <input type="checkbox"/> Specify _____
Refund \$ _____	Financial Aid <input type="checkbox"/> <input type="checkbox"/> _____ <input type="checkbox"/> Accounting _____
	Yes No
Adjustments _____	