

**Application to Withdraw from Class(es)**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

CUNY First Identification Number \_\_\_\_\_

Semester and Year \_\_\_\_\_ Are you withdrawing from all courses?  Yes  No**Courses to be Withdrawn from (W Grade)**

<b>Course</b>	<b>Number</b>	<b>Section</b>	<b>CUNY First Class No.</b>

Student's Signature \_\_\_\_\_