Kuwait University College of Graduate Studies				Julia Lawis with the
Semester / Annual / Program Withdrawal form				
Student Name:	Student No:			
Program:	College:			
Withdrawal From:				
Semester Academic Year (Law Students)	First		S	econd
Program (You have to re-apply if you want to join the program again)				
Reasons for withdrawal:				
Signature of Student:				Date:
Program Use Only				
Approved	No	ot Approved		
Remarks:				Data
Signature & Stamp of Program Director: Signature & Stamp of Area Committee Chairp	oerson.			Date: Date:
CGS Use Only				
Student is registered during the current seme	ster.	Yes		No
Number of semesters from which the student has previously withdrawn:				
Is the student receiving Scholarship/Teaching) Assistants	hip?	Yes	No
Signature & Stamp of Staff:				Date:
Approved Not Approved				
Remarks:				
Name & Stamp of Admission and Registration	n Division H	lead:		Date:
 Important Notice: A student may withdraw for a period not exceeding two semesters or one academic year. A student with provisional admission is not allowed withdraw from a semester or academic year. 				