

# CARDOZO LAW

BENJAMIN N. CARDOZO SCHOOL OF LAW • YESHIVA UNIVERSITY

## Office of the Registrar - OFFICIAL WITHDRAWAL FORM

A student who is withdrawing from the school and does not expect to return at some future date should fill out this form to request an official withdrawal and submit it to the Dean of Students, along with your i.d. card. (A student who plans to return the following semester should fill out the “**Leave of Absence Application**”). Please note that a student’s Cardozo electronic accounts will be disabled 24 hours after his/her official withdrawal and the locker will be reassigned.

Students in F or J Visa status must check with the International Student Advisor before dropping below full-time status.

Name \_\_\_\_\_ Student I.D# \_\_\_\_\_  
Last First M.I.

Phone # : ( ) \_\_\_\_\_ Email : \_\_\_\_\_

Class year: \_\_\_1L \_\_\_ 2L \_\_\_ 3L \_\_\_LL.M. (If you are between class years, please mark the class year that would apply in your next semester if you were to return to school and not withdraw.)

I am leaving the School as of \_\_\_\_\_20\_\_\_\_\_, and request an **Official Withdrawal**. I understand that in order to return to the School in the future, I must reapply.  
month year

I am registered for classes for the current or upcoming semester: \_\_\_ Yes \_\_\_ No

I hereby request permission to withdraw for the following reason:

\_\_\_ Health \_\_\_ Personal \_\_\_ Financial \_\_\_ Military

\_\_\_ Transfer out (please specify which school and reason for transfer) \_\_\_\_\_

Is the school that you will be attending accepting credits earned at Cardozo? \_\_\_ Yes \_\_\_ No

\_\_\_ Career (please specify): \_\_\_\_\_ Other (please specify): \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

-----**FOR OFFICE USE ONLY**-----

Signature of Dean of Students: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

Return signed form to [cardozoregistrar@yu.edu](mailto:cardozoregistrar@yu.edu)