



Student Course Withdrawal Application Form

School Year: _____ Semester: _____ Date: _____

Department/Institute: _____ Grade / Class: _____

Name: _____ Student ID: _____ Email: _____

Phone Number(Cell Phone): _____

| | | | | |
|---|-------------|-------------------------------------|------|-------------------------|
| Application Reason | | | | |
| Course Number | Course Name | Credits | Type | (1)Instructor Signature |
| | | | | |
| Total credits taken this semester : _____ | | | | |
| Remaining credits after withdrawal of course : _____ | | | | |
| Course withdrawal is limited to <u>one course per semester</u> . After withdrawal, students from grades one to three may not have less than 15 credits; grade four students may not have less than 9 credits. | | | | |
| Applicant Signature : _____ | | | | |
| (2)Advisor Signature | | (3)Chairman of Department/Institute | | |
| (4)Curriculum Division | | | | |

Notice :

103.01

1. Please process this application personally according to the 「National Chiao Tung University Student Course Withdrawal Application Policies」.
2. Course withdrawal is limited to one course per semester.
3. After the application has been authorized, please turn in this form to the Curriculum Division before 12/31 in the first semester and 5/31 in the second semester of the year. The application process is then considered completed.
4. The process should be completed based on the earlier deadline of two universities for cross-college course.