

Step 4. Student: Collect the following two (2) required department signatures and e-mail the completed form to the Registrar's Office. E-mail: fmuregistrar@fmuniv.edu | Location: *Earlene & Albert Dotson Student Services Center – Room #130*

Financial Aid Officer

Student Accounts Officer

REGISTRAR'S OFFICE USE ONLY

Date Received: _____

Processed by: _____

Date Processed: _____

Official Withdrawal Date: _____