



### GRADUATE CREDENTIALS WITHDRAWAL FORM

Date		Reference Number		ID Number	
Last Name			Date Confirmed		
First Name					
Middle Name					
Last School Attended			Degree Program Qualified For		

Reasons for withdrawal of confirmation credentials (*please check*):

<input type="checkbox"/>	Distance/Location	<input type="checkbox"/>	Financial Problem
<input type="checkbox"/>	Scheduling Conflicts with Work	<input type="checkbox"/>	Health Concerns
<input type="checkbox"/>	Visa Concerns	<input type="checkbox"/>	Study Abroad
<input type="checkbox"/>	Accepted in another College/University ( <i>please specify the College/University name</i> )		
<input type="checkbox"/>	Scholarship in other College/University ( <i>please specify the College/University name</i> )		
<input type="checkbox"/>	Other reason ( <i>please specify</i> )		

Documents received from Office of Admissions and Scholarships (*please check*)

<input type="checkbox"/>	Transcript of Records (Original)	<input type="checkbox"/>	Original Birth Certificate
<input type="checkbox"/>	Transfer Credentials/Honorable Dismissal	<input type="checkbox"/>	Others
<input type="checkbox"/>	For Others, please specify:		

Signature over Printed Name ( <i>Applicant</i> )		Date	
Signature over Printed Name ( <i>Representative</i> )		Date	
Relationship to Applicant		ID Presented	

<b>OAS USE</b>	Credentials Released by		Date Released	
<b>OUR USE</b>	Dropping of Courses Processed by		Date Transmitted	

#### IMPORTANT REMINDERS

- Credentials requested **before 3:00 pm** will be released at **4:00 pm, the same day**.
- Credentials requested **after 3:00 pm** will be released at **4:00 pm, the next working day**.
- Submission deadline of this Form is first week of classes of the Term where one was admitted.