KERNEL UNIVERSITY
905 South Euclid Street, STE213, Fullerton, California 92832
Tel. 714.995.9988 www.kernel.edu office@kernel.edu

STUDENT WITHDRAWAL FORM

1. Personal Information

Student Name:_____ Student ID:_____

Address:_____

Phone:_____ Email:_____

2. Program of Study

☐ Bachelor of Theology (B.Th.) ☐ Master of Divinity (M.Div.) ☐ Doctor of Ministry (D.Min.)

☐ Business Administration (BSBA) ☐ Master of Business Administration (MBA)

☐ Bachelor of Science in Computer Science (BSCS)

3. Term

☐ Spring ☐ Summer ☐ Fall ☐ Winter Year (20)

Course Number	Course Title	Instructor

* Authorized withdrawal does not affect the student's GPA. A grade "W" will be recorded on the transcript.
* An unauthorized withdrawal may result in a grade of "F" in accordance with University policy.
* The terms and conditions for course withdrawal are provided in the Academic Regulation section of the current Kernel University catalog. Please refer the University catalog or contact the Office of the Registrar with any questions.

4. Withdrawal Reason (F-1 Students Only)

☐ SEVIS Transfer-Out ☐ Departure from the United States ☐ Change of Status Approved

☐ SEVIS Termination Reason: _____

5. Employment information

* If you are withdrawing after obtaining permanent residency, please enter information about where you work.

Company Name: _____

Company Tax ID: _____

Student Signature_____ Date_____

Office Use Only

☐ Authorized Withdrawal
☐ Unauthorized Withdrawal

Director of Administration Signature _____ Date _____