



**UNIVERSITY OF PENNSYLVANIA  
SCHOOL OF NURSING**

**COURSE WITHDRAWAL FORM**

\_\_\_\_\_ TERM

\_\_\_\_\_ DATE SUBMITTED

\_\_\_\_\_  
Penn ID#

\_\_\_\_\_  
LAST NAME

\_\_\_\_\_  
FIRST NAME

has my permission to withdraw from Course # \_\_\_\_\_ at this time without penalty. The grade of 'W' should show on the student's transcript.

**The student is aware of his/her financial obligations as outlined in the tuition refund policies (<http://www.nursing.upenn.edu/students/handbooks/>).**

\_\_\_\_\_  
STUDENT

\_\_\_\_\_  
DATE

\_\_\_\_\_  
INSTRUCTOR

\_\_\_\_\_  
DATE

\_\_\_\_\_  
ASSISTANT DEAN – SCHOOL OF NURSING

\_\_\_\_\_  
DATE