

COURSE REGISTRATION CANCELLATION – Spring 2012

Print Name _____

Banner # _____

Degree Program: *(circle one)* BA/BS BLS BPS MBA MED MS Other

Please cancel my **Spring 2012** registration; I do not plan to attend classes at UMW in the Fall 2011 semester.

For Office Use Only

(signature)

(date)

THIS FORM MUST BE RECEIVED IN THE OFFICE OF THE REGISTRAR BY FRIDAY, January 13, 2012.

All questions about charges for the semester should be directed to the Office of Student Accounts at (540) 654-1250 or umwbills@umw.edu.