



Northwestern State University
University Registrar's Office
Natchitoches, LA 71497
Fax Number: (318) 357-5823
Email: registrar@nsula.edu

RESIGNATION/CANCELLATION FORM

TERM _____

Name of Student _____ SS#/CWID _____
Last First Middle/Maiden

Address _____
Street or P.O. Box City State Zip Code

I wish to resign/cancel my registration for the semester indicated above for the following reason(s):

I understand that my signed cancellation request for fall/spring must be received by the seventh day of classes (for summer, it must be received no later than the second class day of my first session). If I have missed the cancellation period, I acknowledge that I have a right to appeal my registration depending upon my circumstances and the appeal policy in place at the time of my appeal. I understand that the appeal committee's decision is final.

VERY IMPORTANT NOTE: *If you live on campus and to avoid charges to your account, please contact housing (in person or via telephone or email) to finalize the resignation process.*

Student's Signature

Date