NAZARBAYEV UNIVERSITY

Office of the Registrar

Course Withdrawal Form

STUDENT INFORMATION

First name _____ Last name_____

Student ID _____ NU School _____

Major_____ Year of study (1-4)_____

Track (if any)_____ Minor (if any)_____

COURSE INFORMATION

Semester: ☐ Fall20_ _ ☐ Spring20_ _ ☐ Summer20_ _

Course Abbr_____ **Title**_____

Reason of withdrawal__

_____

Number of remaining credits:_____

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