

PACIFIC TECH

OFFICIAL WITHDRAWAL FORM

Name: _____ Student ID#: _____

Address: _____

Date of Birth: _____ Phone Number: _____

Last Date of School Attendance: _____

Reasons for leaving Pacific College of Technology:

By signing this form, I acknowledge that:

- I am voluntarily withdrawing from Pacific College of Technology.
- My F-1 visa status will be terminated upon my withdrawal, if it has not already expired.
- Pacific College of Technology assumes no responsibility for my F-1 visa status or for the reinstatement of my status.

Signature: _____ Date: _____

FOR OFFICE USE ONLY

OFFICE OF BUSINESS AFFAIRS

Signature: _____ Date: _____

OFFICE OF ACADEMIC AFFAIRS

Signature: _____ Date: _____

LIBRARY

Signature: _____ Date: _____