



CONFIRMATION

It is the student's responsibility to consult with their student advisor prior to requesting to withdraw from a full time program.

- By checking this box, I agree to allow PACE to withdraw me from all future course registrations in the full-time program.
- I wish to remain in the course I have already begun in the full-time program and have not yet completed.
- I will withdraw from my current courses by submitting the [Request for Voluntary Withdrawal from an Individual Course \(s\) within a Full-time Program](#) for each course by the course voluntary withdrawal deadline as listed on the course outline.
- I understand that grades will be issued for all current course registrations if I elect not to withdraw from these courses.
- I understand that if I exceed the voluntary withdrawal deadline I will need to appeal for retroactive voluntary withdrawal. See student advisor for process.
- I understand the full time program refund policy will be applied.*

Student Signature _____
Student Advisor Signature _____

Date _____
Date _____

This form must be submitted via email to paceregistration@uwinnipeg.ca