Coastal Carolina University
Honors Program

Withdrawal Form from Honors Program

Last name: ______________________________________
First name: ______________________________________
Student ID#: ____________________________________
CCU Email: ____________________________ @ coastal.edu

Reason for withdrawal:
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

__________________________________________                        ____________________
Student Signature                              Date

Note: by withdrawing from the program, you will not receive an “honors” designation on your transcript
or diploma. You are required to turn in your computer the day you submit your withdrawal.

Office Use Only – do not fill out this section

Date form submitted: _________________________

Computer: _______ yes     _______ no       Tag ID#: _______________________

Computer returned to: _______ Prince 204     _______ Baxley 220

Date: _______________________

Honors Program Director Signature: ________________________________