



Not Returning To ACU

Office of the Registrar, 2625 E Cactus Road, Phoenix, AZ 85032

iPad Serial Number: _____

_____ Will keep iPad _____ Will NOT Keep iPad

Please complete this form if you do not plan to return to ACU next semester. To withdraw from the current semester, please complete the **Withdrawal from School** form.

PLEASE PRINT CLEARLY

Date: _____

Semester Not Returning: FA SP Year: _____

Student's Name: _____

Student ID: _____

Reason for not returning: _____

ALL SIGNATURES ARE REQUIRED BY THE APPROPRIATE DEPARTMENT UNLESS INSTRUCTED OTHERWISE.

- 1. Library: _____
- 2. Athletics Compliance Coordinator (if athlete): _____
- 3. Financial Aid Office: _____
- 4. Information Technology (iPad Return - if applicable): _____
- 5. Residence Life: _____
- 6. Business Office: _____
- 7. Student's Signature: _____ Date: _____

***refund policy - see ACU catalog**

OFFICE USE ONLY

Registrar's Office Signature: _____ Date: _____