



International Student Services
Sierra Vista, 3rd Fl
1500 N Verdugo Rd
Glendale, CA 91208-2894
818-240-1000 x6645
gcciso@glendale.edu

Withdrawal Form

Use this form to request that Glendale Community College end your F-1 status. Do not submit this form for a medical leave of absence; the [Reduced Course Load form](#) must be submitted to request a medical leave of absence. If you are leaving GCC to attend another school, complete the [Transfer Out Request Form](#).

You will have 15 days to depart the US from the day that you request the College close your F-1 record. If you plan to return to GCC within 5 months of your withdrawal date, please contact us at least 2 months before your new term begins to determine if you are eligible to have your I-20 reactivated.

Your Information - Type or print clearly

_____	_____	_____
Last/Family Name	First Name	Middle Name
_____	_____	_____
GCC ID Number	Date of Birth (MM/DD/YY)	Phone number (XXX-XXX-XXXX; please ensure voicemail is activated)

Reason for Withdrawal (please select as many as apply):

- ☐ Financial issues
- ☐ Family/Personal Issues
- ☐ Decided to stop pursuing education
- ☐ Partial Withdraw - please close my F-1 record. I will continue taking classes online from overseas. I understand that this may affect eligibility for OPT and/or an immigration transfer.
- ☐ Change of Status Application - I wish to close my F-1 record while my change of status is pending.
 - ☐ I will continue taking classes at GCC. I understand that I will now receive academic counseling from the [general counseling](#) office.
 - ☐ I will not continue taking classes at GCC.
- ☐ Other (please specify): _____

Are you completing the current semester?

☐ Yes ☐ No. I understand I am responsible for dropping any courses in MyGCC during the [add/drop period](#)*

If it is **past** the add/drop period, please check here to have Admissions & Records drop you from all current term courses: ☐
Remember: you are responsible for tuition fees if dropping after the add/drop deadline for a refund. Please work on a payment plan with the [Tuition Office](#), if needed, to avoid having your account sent to a collection agency.

Departure Date: _____

You must depart the US within **15 days** of submitting this form. If you are completing the semester in the US, you must depart within 15 days of the end of the term.

Student Signature & Date (MM/DD/YY)