University of Houston

Office of the Registrar

TERM WITHDRAWAL REQUEST

STUDENT INFORMATION

Student Name:

Email: iambasic1@test.com

Request Type: Term Withdrawal Request

Submitted On: 2025-03-19 03:33:50

REQUEST DETAILS

form_name: Term Withdrawal Request

signature: None student_name: test

myuh_id: 234234324

last_name: test first_name: test middle_name: test

phone: 32432432432

email: iambasic1@test.com

program_plan: testsd

academic_career: Graduate

withdrawal_term: Spring

APPROVAL STATUS

Request Status: Approved

APPROVED BY

Admin Name: iamadmin34