University of Belize

UB

Education Empowers a Nation

LATE WITHDRAWAL FORM

Student Name	ID Number	Semester	Program Code	Date

****

Course #	**Course Name**	**Credits**	**Instructor**

****

To be filled by instructor

Please make sure you affix a grade of **P** for passing or **F** for failing for the student before signing this form.

Last date of attendance _____   **Grade** _____

Instructor's signature: _____   **Date of signature:** _____