NOTICE OF RESIGNATION
OR REQUEST FOR DEFERRAL

WALTER F. GEORGE SCHOOL OF LAW
MERCER UNIVERSITY
MACON, GEORGIA 31201

NAME: _____
Last First Middle

Mercer ID # _____ **Class 1L 2L 3L**
(Circle one)

ADDRESS: _____

_____

NOTICE OF RESIGNATION: This is to certify that I am requesting resignation as a student effective _____. I have settled all financial obligations with the University and have returned all University property. My reason(s) for withdrawing are as follows:

_____

_____

REQUEST FOR DEFERRAL: This is to certify that I am requesting to withdraw effective _____. I hope to return to law school during the _____ semester. I have settled all financial obligations with the University and have returned all University property. My reason(s) for withdrawing are as follows:

_____

_____

Signed: _____ Date: _____

INSTRUCTIONS: Complete the upper portion of the form and obtain the required signatures below.

Law Librarian	Date
Chris Bombardo	Date
Financial Aid	Date
Approved by: Assistant or Associate Dean	Date

RETURN THE COMPLETED FORM TO THE REGISTRAR'S OFFICE.