Notice of Withdrawal Procedure

You must complete all of the following steps:

1. Last Name ........................................ First Name .............................. Student No .................................................................
   Program: .................................................................................................................................
   Anticipated Withdrawal Date: .................................................................
   Reason for Withdrawal .............................................................................................................

   Mailing Address (for refund if relevant)

   Tel. .................................................. E-mail .................................................................

   Student’s Signature ........................................ Date .........................................................

2. Have room inspected, return keys, and obtain a Housing Clearance Form from the housing supervisor (if relevant).
3. Bring student card to the circulation desk in the Rothberg International School Library to obtain a library clearance.
4. Have form signed by your Division –
   Summer Courses: Room Boyar 430
   Hebrew: Boyar 446
   Undergraduate: Room Boyar 426
   Graduate: Boyar Room 519
   Mechina: Boyar 406

   Division Approval: ........................................ Date .........................................................

5. Submit this form and these required documents to the Finance Office in Room 501/502 or email them to risfinance@savion.huji.ac.il

   Withdrawal is effective as of the date this form and required documents are either submitted to the Finance Office in Room 501/502 or emailed to risfinance@savion.huji.ac.il

   Tuition refunds are calculated according to the schedule published in the Rothberg International School Financial Information Guide

For Finance Office

☐ Balance.................................................... Refund Transfer Info: .................................................................
☐ Housing Clearance Form:
☐ Collect Health Card and cancel Health Insurance
☐ Collect Student Card
☐ Cancel Program in Positive  Y / N

Signature ......................................................................................................................... Date.........................................................