



CONTINUING EDUCATION/EXTENSION COURSE WITHDRAWAL FORM

To withdraw from a course, complete and submit this form to Saskatchewan Polytechnic Registration Services, in person or by email, fax, or mail.

**SASKATCHEWAN POLYTECHNIC
Moose Jaw Campus**
Continuing Education Registration
Saskatchewan St and 6th Ave NW
PO Box 1420
Moose Jaw SK S6H 4R4
Fax 306-691-8578
RegInbox.MooseJaw@saskpolytech.ca

**SASKATCHEWAN POLYTECHNIC
Prince Albert Campus,
Technical Building**
Continuing Education Registration
1100 15th St E
Prince Albert SK S6V 7S4
Fax 306-765-1838
RegInbox.PrinceAlbert@saskpolytech.ca

**SASKATCHEWAN POLYTECHNIC
Regina Campus**
Continuing Education Registration
4500 Wascana Pky
PO Box 556
Regina SK S4P 3A3
Fax 306-775-7760
RegInbox.Regina@saskpolytech.ca

**SASKATCHEWAN POLYTECHNIC
Saskatoon Campus, Idylwyld Dr.**
Continuing Education Registration
1130 Idylwyld Dr N
PO Box 1520
Saskatoon SK S7K 3R5
Fax 306-659-4067
RegInbox.Saskatoon@saskpolytech.ca

Refunds for withdrawals are in accordance with Saskatchewan Polytechnic Tuition and Fees Policy 1214-G. For detailed information, see www.saskpolytech.ca/admissions/tuition-and-fees/refunds-and-withdrawals.aspx.

PERSONAL INFORMATION

Surname (last name)	First Name	Middle Name(s)
Saskatchewan Polytechnic ID Number 000	Birthdate (e.g., 03-Dec-1996)	

COURSE WITHDRAWALS

Course # (PIC)	Course Code and/or Name (Enter at least one, or both, if known)	Course Start Date	Course End Date

SPRING 2017

_____ Student Signature (if you submit this form using the email address you have on file with us, your signature is not required)	_____ Date
_____ Registration Services Representative Signature	_____ Date Received