## **APPLICATION TO WITHDRAW**

Last Name:		First Name	:	
Student Number:				
Year of entry to MEP:	Expected Degree: BHSc in Midwifery			
Current Academic Standing:				
Last term in which you completed/ plan to complete a course:	Fall	Winter	Spring/Summer	Year
Last MEP course(s) completed or plan to complete:				
Important to note:				
<ul> <li>If you are currently enrolled in courses</li> <li>Students interested in re-admission sh</li> <li>You are able to request to return if (1) the last 5 years. Year 1 of 5 is the last y 2020-2021, you must request to return</li> <li>If more than 5 years elapsed since you admissions.</li> <li>Return to the MEP is dependent upon</li> <li>The TMU MEP academic variations req (Fundamentals Midwifery Care I) and of the complex o</li></ul>	ould be sure you were in a year in which no later that were last regarder that no isompletion of the trun accordin Midwifery I(formerly Coll (formerly Coll)	to consult the mogood standing at you were registe n 2025-2026. gistered in an ME available in the comore than 4 year f MWF 410 Clerks ling to the follow III(for example bor example by Ma&C), Complex Cal	ost recent version of the the time you withdrew a red so if for example you?  P course, you will be recond to be a complete t	P&I Handbook. and (2) you were registered in u were last registered in quired to re-apply through letion of MWF 121 er FUN III in Sept 2024).
Student Signature:			_ Date:	
Program Notes:				
Withdrawal approved by:				
Printed Name:		Title:		
Signature:		Date:		