DINFOS Withdrawal Request Form Subject to the Privacy Act of 1974. Authority for this form is Title 10 USC 3012(g), which states: "The Secretary may prescribe regulations to carry out his function, power and duties under the title." Disclosure of information is voluntary. Nondisclosure may prevent us from processing your request. PART I - PERSONAL DATA Last Name, First Name, MI: Email Address: Course: **PART II - REASON FOR REQUEST** Emergency Mission Requirements Medical Other **PART III - DINFOS POLICY** Administrative Elimination. Students may be eliminated for a variety of reasons. Either DINFOS, service detachments, or Student's Agency Supervisor (in the case of DL/IMSO students) may initiate an administrative elimination. If initiated by DINFOS or a student's Agency Supervisor (for DL/IMSO students), the student will remain in class until the action is complete. Re-enrollment. If a student voluntarily withdraws from a course, they are eligible to enroll in any Defense Information School (DINFOS) course without needing a waiver. Date: Student Signature: (Digital or hand written signatures only) **PART IV - SUPERVISOR** You are authorizing the Defense Information School Registrar's Office to administratively withdraw the student for the reasons outlined above. Please note that this process may take up to five business days to complete. The student must continue attending the course until the withdrawal is finalized. Failure to do so will result in academic elimination from the course and a one-year penalty. The student will receive a notification once the withdrawal process is complete. Supervisor Signature: (Digital or hand written signatures only) Date: **Defense Information School** Registrar's Office 6500 Mapes Rd. Fort George G. Meade, Maryland 20755-5620 Phone: 301-677-4343 DSN: 622-4343 Fax: 301-677-6888, DSN: 622-6888

NOTE: Please do not alter the format of this form. This information is needed to process requests accurately and in a timely manner.

Email: registrar@dinfos.edu