

PROGRAM & COURSE WITHDRAWAL FORM

INSTRUCTIONS

- USE THIS FORM TO
 - DROP COURSES DURING THE SEMESTER AFTER THE ADD/DROP PERIOD.
 - WITHDRAW FROM THE PROGRAM

SEE SECTION 15 OF THE STUDENT CATALOG¹ FOR REFUND POLICY.

PRORATED REFUND BEFORE 64 DAYS AFTER THE SEMESTER BEGINS. NO REFUND AFTER 63rd DAY.

- EMAIL FILLED FORM TO REGISTRAR@VAYUUSA.ORG

STUDENT NAME: _____, _____ **VAYU EMAIL ID:** _____@VAYUUSA.ORG
(AS PER ENROLLMENT AGREEMENT) FIRST NAME LAST NAME DATE OF WITHDRAWAL MM/DD/YYYY

TERM WHEN FIRST ENROLLED IN THE PROGRAM: Spring / Fall / Summer **YEAR** _____
(STRIKE WHAT IS NOT APPLICABLE) (YYYY)

I WOULD LIKE TO WITHDRAW FROM (✓CHECK ALL THAT IS APPLICABLE)

☐ VAYU ONLINE MS (YOGA) PROGRAM ☐ VAYU ONLINE PH.D. (YOGA) PROGRAM

☐ LIST THE COURSES IN THE TABLE BELOW YOU WANT TO WITHDRAW DURING THE TERM SPRING / FALL / SUMMER **YEAR** _____
(STRIKE WHAT IS NOT APPLICABLE) (YYYY)

SL. #	COURSE NUMBER (E.G. YMS 101T)	TITLE (E.G. BASIS OF YOGA THERAPY)	CREDITS (X:Y) (E.G. 2:0)	
1				
2				
3				
4				

PLEASE PROCESS THE REFUND DUE TO ME AND MAIL THE CHECK TO THE ADDRESS BELOW¹.

NUMBER AND STREET

CONTACT PHONE NO

ADDRESS SECOND LINE (APT #)

NON-VAYU EMAIL ID

CITY

STATE

ZIP CODE

SIGNATURE

STUDENT NAME

DATE MM/DD/YYYY

For VAYU use: DO NOT WRITE BELOW THIS LINE

OFFICE OF THE REGISTRAR: REGISTRAR@VAYUUSA.ORG

APPLICATION RECEIVED ON: _____ ☐ ACCEPTED ☐ REJECTED
DATE MM/DD/YYYY

SIGNATURE

OFFICIAL'S NAME

DATE MM/DD/YYYY

REASON

OFFICE OF FINANCE AND ACCOUNTS: ACCOUNTS@VAYUUSA.ORG

CHECK DATE	CHECK NO.	CHECK AMOUNT (\$)	
BANK NAME	REMARKS		

ITEM	AMOUNT
STUDENT PAID THIS SEMESTER	\$
STUDENT PAYMENT DUE THIS SEMESTER	\$
REGISTRATION FEES (NON-REFUNDABLE)	-\$
EBOOKS (NON-REFUNDABLE)	-\$
TOTAL AMOUNT FOR CONSIDERATION (A)	\$
DAYS ATTENDED (D) THIS SEMESTER	
REFUND= $A * \left(1 - \frac{D}{60}\right)$	\$
LESS STUDENT DUES	-\$
NET ELIGIBLE REFUND FOR STUDENT	\$

SIGNATURE

VAYU ACCOUNTS OFFICIAL NAME

DATE MM/DD/YYYY

¹ <https://vayuusa.org/admissions/#admissions-school-catalog>

