



# Student-Athlete Voluntary Withdrawal Form



STUDENT-ATHLETE NAME: \_\_\_\_\_

TEAM: \_\_\_\_\_ VT ID: \_\_\_\_\_ DATE: \_\_\_\_\_

I do hereby confirm my voluntary withdrawal from the team. I understand that this may affect my athletics scholarship, if I am currently receiving one.

STUDENT-ATHLETE SIGNATURE: \_\_\_\_\_

It has been determined that the student-athlete will continue to receive his/her athletics aid through ***(applicable choice to be initialed by head coach and student-athlete)***:

\_\_\_\_\_ THE END OF THE ACADEMIC YEAR

\_\_\_\_\_ THE END OF THE FALL TERM

\_\_\_\_\_ TODAY (If aid has disbursed, student-athlete will be billed)

\_\_\_\_\_ THIS STUDENT-ATHLETE IS NOT RECEIVING ATHLETICALLY-RELATED AID

\_\_\_\_\_  
*HEAD COACH*

\_\_\_\_\_  
*STUDENT-ATHLETE*

\_\_\_\_\_  
*SPORT SUPERVISOR*

\_\_\_\_\_  
*COMPLIANCE OFFICE DESIGNEE*

cc: Head Coach  
Office of Scholarships & Financial Aid

Supervising Associate AD  
Athletics Compliance Office

Athletics Business Office  
Student-Athlete File