Academic Withdrawal Confirmation

Date: [Insert Date]

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]

[Recipient's Name]
[Position]
[University/College Name]
[Department]
[University Address]
[City, State, Zip Code]

Dear [Recipient's Name],

I am writing to formally confirm my academic withdrawal from [Course/Program Name] at [University/College Name], effective [Withdrawal Date]. This decision comes as a result of unexpected life events that have significantly impacted my ability to complete my studies at this time.

I would like to express my gratitude for the support and guidance I have received during my time at [University/College Name]. I hope to return in the future once my circumstances improve.

Please let me know if there are any further steps I need to take or if you require additional information regarding my withdrawal.

Thank you for your understanding.

Sincerely,

[Your Name]