TO: Associate Head, Department of Physics

RE: Resignation

I, ________________________________ hereby resign my appointment as

Print Name

____________________ within the Department of Physics effective with the

RA / TA

close of business ____________________________

Month    Day    Year

I understand that the students who resign their appointments before working for at least ninety-on days past the first day of registration for the fall or spring term or forty-one days past the first day of registration for the summer term will be assessed tuition and fees for the term unless they either:

a) Withdraw from the University or
b) Turn in the PhD thesis to the Graduate College within seven days before or after the date of resignation.

Signature: _______________________________________________________

Date: __________________________

Month    Day    Year

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