

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

Office of the Registrar
YRD College
[College Address]
[City, State, ZIP Code]

Dear Registrar,

Subject: College Withdrawal Request

I hope this letter finds you well. I am writing to formally request my withdrawal from YRD College, effective immediately. My student ID number is [Your Student ID].

Due to [brief reason for withdrawal, e.g., personal, financial, or health-related issues], I am unable to continue my studies at this time. I have carefully considered my decision and believe it is in my best interest.

I kindly ask for your assistance in processing my withdrawal and providing any necessary documentation for my records. Please let me know if there are any forms I need to complete or further steps I should take. Thank you for your understanding and support during this process.

Sincerely,

[Your Name]

[Your Signature (if sending a hard copy)]