

Case#:	APPL#:
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## Request for Withdrawal/Waiver of Application

My potential eligibility for \_\_\_\_\_ has been explained to me. However, at this time, I wish to withdraw my application or waive my right to apply for this (these) program(s). I understand that I am free to reapply for this (these) program(s) at any time, whether or not my circumstances have changed.

Signature:	Date:
Signature:	Date:

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Employee's Comments: *(if CLRC is not accessible)*

Employee's Signature:	Date:
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