# Student Course Withdrawal

## Form Dual Enrolled & Student Athletes Only

**Student**: Change is NOT OFFICIAL until this form is completed and filed in the Records Office prior to the official deadline stated in the college catalog. Please visit the online academic calendar to review withdrawal deadlines for all course sessions.

Prior to submitting this form, it is highly recommended that you schedule a conference with your course instructor(s) to determine your current status, review options, and consider future educational goals.

## Name

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<th>Print: (Last)</th>
<th>(First)</th>
<th>(Middle/Maiden)</th>
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**Term** __________________________ **Year** ______

**X- ID Number**

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<tr>
<th>CRN #</th>
<th>Course Prefix &amp; No.</th>
<th>Instructor</th>
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## Reason for Withdrawal:

- [ ] Academic Performance
- [ ] Personal or Family Illness
- [ ] Financial Circumstances
- [ ] Change in Academic or Career Goals
- [ ] Geographic Move
- [ ] Work Demands
- [ ] Other __________________________

## ATTENTION FINANCIAL AID RECIPIENTS:

Check if applicable:  
- [ ] Financial Aid Recipient  
- [ ] Veteran’s Benefits Recipient

You must check with the Financial Aid Office prior to withdrawing. Your financial aid may be affected and/or you may be required to repay all or part of your financial aid award.

**NOTE**: Any outstanding financial obligations, (for example: parking fines, library fines, loan repayments) will prohibit release of academic records and prevent future registration. Withdrawals are not refundable.

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**Student Signature** __________________________  **Print - Student Name** __________________________  **Date**

**High School Counselor Signature (Dual enrollment only)** __________________________  **Print - High School Counselor** __________________________  **Date**

**Dual Enrollment Staff Signature (Dual enrollment only)** __________________________  **Print - Dual Enrollment Staff** __________________________  **Date**

**Athletics Director (Athletics only)** __________________________  **Print - Athletics Director** __________________________  **Date**

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**For Office use only:**

**Admissions & Records Signature** __________________________  **Print - Admissions & Records Name** __________________________  **Date**