

Course Withdrawal Form

Date:

Student ID Number:

Name: _____ First Name Last Name Phone Number: Email Address: Semester: Summer 2 2024 Student Signature: ______ A student may withdraw without academic penalty through the tenth week (or equivalent) of class. Without academic penalty is defined as the grade will not impact the QPA. After the tenth week (or equivalent) through the last day of the semester the student must obtain the instructor's signature. The instructor will designate if the student withdrew while passing ('W' grade) or withdrew while failing ('F' grade). Please review the Grading Policy in the College Catalog for more information. Please Note: Withdrawing from one or more courses can impact course sequencing, pre-requisites, financial aid, and/or family medical insurance. Course and Section Number *Instructor (Please check one grade after tenth week of class) Instructor or Advisor Signature Date Please Indicate the Reason for Withdrawal (select all that apply): Personal: ____ Lack of transportation ____ Childcare problems (CH) (TR) ____ Moving Health (personal) (HE) (MO) Health (family) (HF) ____ Work Schedule Conflict (WK) ____ Not ready for college Military Service (MS) (NR) ____ Foreign or Government Service ____ Church/Missionary (FG) (CM) Financial: Insufficient financial aid ____ Ineligible for financial aid (IF) (FA) Change in financial situation (CF) **Educational:** Overwhelmed by studies Courses did not meet goal (GO) (ED) ____ Transferred to 2 yr institution Other (explain): (T2) ____ Transferred to 4 yr institution (T4)