

MARTIN COMMUNITY COLLEGE

WITHDRAWAL FORM

STUDENT RESPONSIBILITY Students are responsible for completing this form and obtaining each instructor's signature prior to submitting it to the Registrar's Office.

**INTERNET/
TRADITIONAL CLASSES** Students must obtain instructor's signature and last date of attendance. Students enrolled in online courses may email the instructor(s) to inform them of their intent to withdraw from a class and attach a copy of the instructor's response to this form. The instructor should state the last date the student submitted work in the Internet class in the response.

To be officially withdrawn from a course(s), this form must be received in the Registrar's office on or before the published *Last Day to Withdraw before receiving an "F" deadline of the course* according to the Academic Calendar.

LAST NAME	FIRST NAME	MIDDLE INITIAL	STUDENT ID NUMBER
PROGRAM		TERM <input type="checkbox"/> FALL <input type="checkbox"/> SPRING <input type="checkbox"/> SUMMER YEAR _____ Select the Appropriate Term Button	

WITHDRAWAL

DROP CODE	COURSE PREFIX	COURSE NUMBER	SECTION NUMBER	CREDIT HOURS	COURSE TITLE	INSTRUCTOR SIGNATURE OR EMAIL	DATE LAST ATTENDED

DROP REASON: (C) - CHILD CARE (DI) - DISSATISFIED WITH INSTRUCTOR/COURSE
 (F) - FINANCIAL REASONS (G) - GRADES (I) - ILLNESS (L) - COURSE LOAD TOO HEAVY
 (O) - OTHER _____ (T) - TRANSPORTATION (W) - WORK SCHEDULE

I have spoken to my advisor regarding the effect of withdrawing from my class(es) and understand that I may need to speak with financial aid and/or Veteran's Affairs if applicable to be aware of the possible financial impact on me by withdrawing from my course(s).

SIGNATURE OF STUDENT _____

SIGNATURE OF ADVISOR OR EMAIL _____

SIGNATURE OF REGISTRAR'S OFFICE STAFF _____ DATE _____

REGISTRAR'S OFFICE

ADVISOR

INSTRUCTOR

FINANCIAL AID

STUDENT