



DUAL ENROLLMENT COURSE DROP/WITHDRAW FORM

Please complete this form in its entirety.

Date: ____/____/____

Student Name (legal): _____ Student ID: _____

Address: _____ City/Town: _____

State: _____ Zip Code: _____ Telephone #: _____

SEMESTER/TERM:

☐ Summer ☐ Fall ☐ Spring ☐ Full Academic Year

Year: _____

DROP COURSES:

<u>Course Name</u>	<u>Course #</u>	<u>Section #</u>	<u>Instructor</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please be sure to discuss policy dates with your instructor/counselor to determine whether dropping or withdrawing from your course(s) will result in a W grade on your transcript. Dropping or withdrawing can affect tuition and fee refunds, please be aware this could mean you are potentially responsible for all or a portion of the course(s) tuition, depending on your high school's policy.

Student Signature: _____ Date: ____/____/____