

Request to Withdraw from All Classes

Date received by Student Service Center. (Refunds and financial aid will be determined by this date.)

Information must be printed or typed in black or blue ink. (Penciled forms will not be accepted.)

Today's Date: Last Name Student ID: Street Address: Home Phone:			_ Semester:	Semester: Academic Prog				
			First Nar	ne				
			Home Location:	Union _	Rolla _	Sullivan		
			Ci	y:		State	e: Zip:	
			Cell Phone:	Email:				
Cha Lac Trai Not Not	for withdrawinge in employm k of educational asitioning back t academically properties are the statement of	ent schedule goal so workforce repared for c echnology	eHea Hac eMo collegeMil	alth Concern I to get a job ving from a itary require sonal or fam	rea ements nily stress	Lack o Financ No Ac	isfied with classe of financial aid ial Concerns cess to Technolo	Č
<u>Dept</u>	Course #	Section	Course Title					
Dogwir	ed Signatures							
Student un enrollment	t:derstands failure to su may affect one or mo	bmit this form in	n a timely manner may result ng: Scholarship, federal gran nce • Other enrollment-based	in an administra t status, or avail	ntive withdrawa ability of other	financial aid statu	Student understands of seas • Co- or pre- requisi	
Adviso	r:	41-4-4-4-4-41	been aware of effects this pe	Date_	hi- /h EC/	2 1 1		
			been aware of effects this pe					
Busines (When app	ss Office:	be given a copy	of their outstanding account l	Date_ balance.)			-	

Submit completed form to Student Service Center, East Central College, 1964 Prairie Dell Road, Union, MO 63084. Classes withdrawn prior to the end of the fourth week of classes in the fall or spring will not be recorded. Classes withdrawn prior to the withdrawal deadline printed in the course schedule will receive a W grade. Summer dates are prorated.