

One form per course is required

ALL information must be filled in for withdrawal to be processed

Student ID Number \_\_\_\_\_ Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Course Prefix \_\_\_\_\_ Number \_\_\_\_\_ Section \_\_\_\_\_ Instructor's Name \_\_\_\_\_  
 (i.e. ENGL 1301 501)

Student Email Address \_\_\_\_\_

Reason for withdrawal \_\_\_\_\_

HIGH SCHOOL COUNSELOR SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_

HIGH SCHOOL NAME \_\_\_\_\_

Was this student F & R? Yes \_\_\_\_\_ No \_\_\_\_\_

Does this student need the class for graduation? Yes \_\_\_\_\_ No \_\_\_\_\_

PARENT SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_

(I understand that the student will be subject to class fees and a "W" on their transcript)

STUDENT SIGNATURE \_\_\_\_\_ Date \_\_\_\_\_

(I verify that the information provided is true and correct. I understand the academic implications of withdrawing from the course)

**Forms can be scanned to the following Dual Credit Staff**

<b>Bowie and Graham Campuses</b>  Debbie Endres <a href="mailto:daendres@nctc.edu">daendres@nctc.edu</a> P.O. Box 1247 810 S. Mill St. Bowie, TX 76230	<b>Corinth Campus</b>  Diane Mannion <a href="mailto:dmannion@nctc.edu">dmannion@nctc.edu</a> 1500 North Corinth St. Corinth, TX 76208	<b>Gainesville Campus</b>  Danelle Wolf <a href="mailto:dwolf@nctc.edu">dwolf@nctc.edu</a> 1525 W. California St. Gainesville, TX 76240	<b>Flower Mound Campus</b>  Patty Barrera <a href="mailto:pbarrera@nctc.edu">pbarrera@nctc.edu</a> 1200 Parker Square Flower Mound, TX 75028	<b>Gainesville Campus</b>  Susan Cooper <a href="mailto:scooper@nctc.edu">scooper@nctc.edu</a> 1525 W. California St. Gainesville, TX 76240
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RECEIVED
Date: _____
By: _____
Term: _____

PROCESSED
Date: _____
By: _____

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