COURSE WITHDRAWAL

All VA students must contact the VA Office.
All F1 students must contact the Admissions Office.
All students receiving financial aid must contact the Financial Aid Office.

STUDENT ID ___________________________ Semester Course Was Taken ________ Term ________ Year ________

NAME ____________________________ Last ____________________________ First ____________________________ MI __________

Are you receiving VA benefits? ☐ Yes ☐ No

<table>
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<th>Subject</th>
<th>Course Number</th>
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☐ Please withdraw me from all course(s) for the ____________________________ semester.

☐ Academically Unprepared (AU) ☐ Failing (FG) ☐ Medical Illness (MI) ☐ Transfer Credit Denied at Another Institution (TC)
☐ Became Employed (BE) ☐ Family Emergency (FE) ☐ Military Duty (ML) ☐ Work Hours Changed (WC)
☐ Equivalent Credit Approved (EC) ☐ Financial Circumstances (FC) ☐ Reduce Hours of Enrollment (RE) ☐ Work Relocation (WR)
☐ Other ____________________________

Total Credit Hours Before Change ________ Total Credit Hours After Change ________

Student Signature: ____________________________ Date __________
Advisor’s Signature: ____________________________ Date __________
Registrar’s Office: Processed by ____________________________ Date __________

Charleston Bridge Students: Return this form to the College of Charleston Office of the Registrar located on the second floor of the Lightsey Center, 160 Calhoun Street, Ste. 281 before the specified course withdrawal deadline.