## **COURSE WITHDRAWAL REQUEST**



**DO NOT USE THIS FORM IF** the drop period is still in effect. Please see the Academic Calendar for drop dates at rcbc.edu/academic-calendar.

									<u>Date</u>	ρ	
DATE (MM/DD/YY)		I.D. NO									
LAST NAME		FIRST NAME						AR: 20			
ADDRESS				APT/BUILDING #						Fall Spring	
CITY			STATE			ZIP CODE			□ Summer I □ Summer II □ Mini Term		
PHONE NUMBER (XXX) XX	XX-XXXX		RCBC EMAIL			@mymail.rcbc.edu				Willi Term	
<b>Do you attend:</b> (please ☐ Full-Time ☐ Part-Time	☐ Stil	e the statement value of the statement value							return to RCBC ne		
SUBJECT	NUMBER	SECTION	COURS	SE TITLE	Last Date Attended/ Logged In (MM/DD/YY)	Did you dis withdrawa advisor/ co (please se	l with an ounselor?			om list and fill in a number for each course. ason on the line beside number 18.	
What could RCRC ha	ve done to help you	continue in the c	oursals\? Plagea nr	int: PLEA	SE READ CAREFU	YES YES YES YES YES YES YES YES	□ NO □ NO □ NO □ NO □ NO		1 - Work schedule conflict 2 - Financial difficulty 3 - Childcare issues 4 - Military duty 5 - Change of major 6 - Family responsibilities 7 - Illness/medical reasons 8 - Cost/availability of texts 9 - Academically unprepared	10 - Course load too heavy 11 - Not doing well/failing 12 - Unable to keep up with class work 13 - Unhappy with course content/material 14 - Unhappy with instructor 15 - Instructor recommended withdrawal 16 - Technology not satisfactory for course 17 - Tested out of course 18 - Other:	
What could RCBC ha	ve done to neip you	continue in the c	ourse(s)? Please pr	Init	I understand which may af I understand at Burlington I understand encouraged t *Electronic s	withdrawing ffect my satis that academi County and I that withdray to see a Finar	from a cou factory ac- ic advisors I am strong wing from a ncial Aid Of	urse will r ademic pr are availa gly encour a course r fficer prio	esult in a 'W' grade or rogress. able to assist all stud raged to see one prior may affect my financi r to withdrawing, as	ents of Rowan College	

Please email form to registration@rcbc.edu via your RCBC student email.

This form will not be accepted if faxed, mailed, or sent from a non-RCBC email account.

Student Signature

**FOR OFFICE USE ONLY** 

Registration Office Signature