

**This form is to assist students who find it necessary to leave CMCC before program requirements are completed. Students must complete this form and return it to the Registrar's Office to assure all responsibilities to the College have been fulfilled and the appropriate adjustments are made to the student bill.**

**To Be Completed By Student**

Student Name (*print legibly*): \_\_\_\_\_

Student ID: \_\_\_\_\_ Birthdate (mm/dd/yyyy): \_\_\_\_\_

Permanent Address: \_\_\_\_\_  
Street & Number City State Zip

Reason for Withdrawal:

- Received job offer/internship
- Personal reasons
- Could not get into the desired major
- Academic resources/classes did not meet my needs
- Military
- Transferring to (please specify) \_\_\_\_\_
- Moving
- Other: \_\_\_\_\_

Recommended Consultation (*please check those you have advised (notified) of your withdrawal*):

Financial Aid \_\_\_\_\_ Resident Director (Housing student only) \_\_\_\_\_

Advisor \_\_\_\_\_ Veterans Certification Officer (Veterans only) \_\_\_\_\_

**Student Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**To Be Completed By Registrar**

Comments: \_\_\_\_\_

Date of Official Withdrawal (mm/dd/yyyy): \_\_\_\_\_

Signature of Registrar: \_\_\_\_\_

Copy to Library \_\_\_\_\_

Copy to Business Office \_\_\_\_\_

Dropped All Coursework \_\_\_\_\_

Grades Given \_\_\_\_\_

De-matriculated Student \_\_\_\_\_

File Pulled \_\_\_\_\_