



DROP REQUEST FORM

INSTRUCTIONS: IF YOU INTEND TO DROP ALL COURSES THIS SEMESTER, DO NOT USE THIS FORM.
 YOU MUST COMPLETE A WITHDRAWAL FORM WITH AN ACADEMIC ADVISOR IN EAST END ADVISING,
 ROOM 119 ON THE DONALDSON CAMPUS.

Student must obtain Faculty OR Advisor signature.*

Refer to the Student Guide or www.helenacollege.edu for information on the last day to drop a course.

*****PLEASE COMPLETE FORM IN INK, OR COMPLETE ONLINE, PRINT, SIGN IN INK AND OBTAIN REQUIRED SIGNATURE*****

STUDENT ID#: 7 7 0 0

NAME (LAST, FIRST, MIDDLE): _____

TERM: _____ AND YEAR: _____
 SPRING, SUMMER, OR FALL (Circle one)

SIGNATURE: _____ DATE _____

DO YOU RECEIVE VETERAN EDUCATION BENEFITS? YES NO

DROP	Course Subject/ Number	Course Title	Credits	CRN	Faculty Signature	OR*	Advisor Signature	

 SIGNATURE OF DIVISION/DEPARTMENT CHAIR DATE

For Office Use Only

Initials: _____ Date: _____