MIDDLESEX COMMUNITY COLLEGE

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WITHDRAWAL FORM – AFTER THE REFUND DATE

Signed form must be delivered or faxed (860-344-3055) to the Registrar's Office by 4:30 pm on the deadline date.
No forms will be accepted after the deadline.
Please consult the Academic Calendar for the deadline date.

Failure to submit this form by the deadline may result in a grade of "F" for the course.

Student ID @_____ **OR** Social Security No. _____/_____/_____

Name_____ Phone #_____

Student Signature_____ Today's Date _____

Please Check One: ❒ Withdrawal from ALL Courses from the Current Semester
❒ Withdrawal from ONLY those courses listed below (EACH COURSE INSTRUCTOR'S SIGNATURE IS REQUIRED)

Semester: ❒ Fall ❒ Spring ❒ Summer ❒ Winter Intersession Year: _____

FINANCIAL AID and/or VETERAN'S BENEFITS may be affected by your withdrawal. Make an appointment with the Financial Aid Office or the Veterans Counselor **PRIOR** to submitting this form.

Financial Aid Recipient: ❒ Yes ❒ No **Veterans' Benefits Recipient:** ❒ Yes ❒ No

_____ _____
Financial Aid Signature if Applicable Veterans Representative Signature if Applicable

Reason for Withdrawal:

_____

_____

_____

CRN# (ex. 3210)	COURSE (ex. ENG 101)	COURSE TITLE (ex. Composition)	INSTRUCTOR'S SIGNATURE (Required for Individual Course Withdrawals)

ALL DEBTS are the responsibility of the student and must be paid immediately.

For Office Use Only: Date Received and Processed: _____