



Course Withdrawal Muskingum College

Instructions: Please complete this form, get the signatures of the instructor(s) and your advisor and submit it to the Registrar's Office, 119 Montgomery Hall for processing.

NAME: _____ ID#: _____

Request: I hereby request that I be allowed to withdraw from the following course(s) during the semester/term indicated: (must get instructor's signature)

Fall 200____ Spring 200____ May Term 200____

Dept.	Crs #	Sec	Course Title	Instructor's Signature / Date
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Please give a short explanation for your decision to withdraw from the course(s): _____

Acknowledgment: I hereby acknowledge that my decision may have unanticipated consequences, including those listed below, and that I understand that the College is in no way responsible for these outcomes. By withdrawing from one or more courses after the end of the add/drop period, I realize that I will receive a grade of W in the course(s) and that :

- If I am still considered a full-time student, I may have to enroll in additional semesters/terms in order to graduate.
- If my withdrawal causes me to be enrolled less than full-time, I understand the following:
 - my intercollegiate athletic eligibility will be affected
 - my financial aid eligibility and student loan repayment may be affected
 - my current tuition charges will not be reduced
 - my graduation date may be delayed by as much as a year

Student's signature and date: _____

Advisor's signature and date: _____

Registrar's Office: _____ W grade(s) assigned by: _____ Date: _____