

KIRTLAND COMMUNITY COLLEGE

Office of the Registrar

Fax: (989) 275-6789; registrar@kirtland.edu



ADD/DROP/WITHDRAW FORM - SCHEDULE CHANGE

Semester/Year

Student ID#: _____

Name: _____

LAST

FIRST

MIDDLE

CIRCLE ONE:	COURSE NUMBER	CREDITS	TUITION HRS	FOR INSTRUCTOR/ADVISOR USE
<input checked="" type="radio"/> ADD <input type="radio"/> DROP	(example) ACC-12500-60	4	4	Credit Overload Approval (Dean or Counseling only)
ADD DROP				Authorized Signature
ADD DROP				Time Conflict Override Approval
ADD DROP				Authorized Signature
ADD DROP				(Instructor whose class you will be leaving early must sign.)
ADD DROP				Late Entry Instructor/Late Drop Dean of Instruction
ADD DROP				Authorized Signature
ADD DROP				Other (please specify)
ADD DROP				
ADD DROP				Authorized Signature
ADD DROP				
ADD DROP				

Please check the ONE REASON THAT MOST APPLIES for withdrawing from your course(s) this semester

Academic

- _____ (101) Instructor's recommendation to drop course
- _____ (102) Too many courses
- _____ (103) Course(s) too difficult
- _____ (106) Dissatisfied with instructor
- _____ (107) Changed my educational plans or major

Personal

- _____ (701) Personal/family illness or injury
- _____ (702) Personal/family responsibilities or problems
- _____ (703) Transportation problems
- _____ (704) Child care problems
- _____ (706) Moving away from the area
- _____ (707) Serving in the Armed Forces

Employment

- _____ (302) Lack of study time because of job demands
- _____ (303) Work hours conflict with class schedule

_____ (901) **Other** - Please explain _____

Is this a total withdrawal from ALL classes? YES NO

_____ (902) Administrative

I understand that it is my responsibility to consult with the Financial Aid Office before dropping a class regarding the impact that dropping a class may have on my financial aid/veterans benefit status.

Student Signature: _____ **Date:** _____

<i>for office use only:</i>	Notified	Drop w/Refund?	Processed by:
_____	<input type="checkbox"/> Fin Aid	<input type="checkbox"/>	_____
_____	<input type="checkbox"/> E-Services	<input type="checkbox"/>	total W in system
_____			_____