

J.F. Ingram State Technical College Course Withdrawal/Termination Form

PLEASE PRINT IN BLACK INK

Date:	[]	Withdrawal Course(s)	[]	Termination of Enrollment
Last Name:		First Name:		AIS#:
Semester:	Facility:	:	A Numb	er:
OFFICIAL LAST I	DATE OF ATTENDANCE:			ructor Initials
		Reason for With (Check One		
[] Disciplinary A	ction (ISTC or DOC)	[] Lack of Interest	in School	[] Non-attendance
[] Failure to Meet Standards of Academic Progress [] Other [] No Show (prior to Add/				
Specific reasons for Withdrawal/Termination (Student Services Representative):				[] DOC Transfer/Program Participation
	date of withdrawal/termination i with a "N/A" if student is a No Show			o withdraw will receive the grade of "W". Last Date of
Course Number	Course Title	Last Date Attended	Grade	Instructor's Signature
Student Signature:			Advisor Signature:	
Student Services Signature:			Keyed by/Date:	
Dean of Student Re	presentative Signature:			<u> </u>