

JEFFERSON STATE COMMUNITY COLLEGE
PERMISSION TO WITHDRAW FROM COURSE
PRIOR TO MIDTERM

STUDENT'S NAME _____ DATE _____
(Last) (First) (Middle)

STUDENT NO. _____ SIGNATURE _____

SUBJECT	COURSE NO.	SECTION NO.	GRADE
			W

Date of withdrawal will be the date this completed form is received by Enrollment Services.

Received and dated by: _____
Enrollment Services