DYERSBURG STATE COMMUNITY COLLEGE
WITHDRAWAL FORM

The completed form must be returned to the Office of Admissions & Records.

Please note that if you leave the College with any debts and/or obligations, the College will not be able to release your grades or an official copy of your transcript. Furthermore, future enrollment at DSCC will be denied until all debts and/or obligations are cleared. You are strongly advised to contact (1) the Learning Resource Center to make sure that you have no material checked out and (2) the Financial Aid Office if you were awarded any type of aid for this term.

DSCC ID# _____ Term _____

_____

Last Name First Name Middle Name

I am withdrawing from the College for the following reason:_____

_____

_____

_____

Any refunds should be mailed to this address: :_____

_____

_____

_____ _____

Student Signature Date

_____ _____

Dean of Student Services/Designee Date

(Required only after the deadline to withdraw)

Admissions & Records Use Only:	Business Office Use Only:
Date Received _____	Initials ___ Date _____
Date Completed_____	
Initials_____	