



WITHDRAWAL FORM

One Stop Student Services - onestop@cwidaho.cc - 208.562.3000 phone - 888.562.3216 fax
PO Box 3010 - Nampa, ID 83687 - www.cwidaho.cc

BEFORE CENSUS - This form is used to **DROP** a partial or full schedule of courses. To be used by students who are unable to drop courses online. **AFTER CENSUS** - This form is used to **WITHDRAW** from a partial or full schedule of courses. No course may be dropped or withdrawn from after 75% of the course or twelve weeks of the term have elapsed, whichever is earlier.
This form must be submitted in person by the student, through the student's CWI email, by fax or mail with copy of current photo ID.

LAST NAME _____ FIRST NAME _____ M.I. _____ STUDENT ID -OR- SOCIAL SECURITY NUMBER _____

PHONE NUMBER (INCLUDING AREA CODE) _____ DATE OF BIRTH _____

PARTIAL WITHDRAWAL FROM SCHEDULE

If withdrawing from a partial schedule of courses in which you are enrolled (meaning one or more, but not ALL of your courses); please fill out **ONLY** the Partial Withdrawal portion of this form.

Semester: Fall 20____ Spring 20____ Summer 20____

Subject	Course#	Section	Title	Credits

-OR-

COMPLETE WITHDRAWAL FROM SCHEDULE

If withdrawing from a full schedule of courses in which you are enrolled (meaning ALL of your courses) Please fill out **ONLY** the Complete Withdrawal portion of this form.

Semester: Fall 20____ Spring 20____ Summer 20____

Withdrawal Reason (please check all that apply):

Financial

- Financial, Found Work
- Financial, No Money

Health

- Health, Family
- Health, Personal

Other

- No reason
- Other, Please Specify _____

Personal

- Change of Marital Status
- Child Care Problems
- Death in Family
- Family Concerns
- Lack of Interest
- Lack of Transportation
- Moving
- Work Conflicts

School

- Discouraged by Faculty
- Discouraged by Staff
- Getting Low Grades
- Transfer to another School
- Wasn't as Expected

GUIDELINES/SIGNATURE

I am withdrawing from a partial schedule or full schedule of courses in which I am enrolled for the semester indicated above which have not yet been graded. I understand that withdrawing from CWI courses may affect student financial aid, academic standing or ability to continue in a chosen major. Please see your advisor for more information.

STUDENT SIGNATURE _____

DATE _____

ONE STOP APPROVAL _____

DATE _____

CWI delivers college credit instruction, certificates and degrees through its memorandum of understanding with College of Southern Idaho (CSI). CSI is accredited through The Northwest Commission on Colleges and Universities (NWCCU).