



**Office of the Registrar**

450 North Avenue • Battle Creek, MI 49017-3397  
(269) 965-4129 • www.kellogg.edu/registrar

**COURSE WITHDRAWAL**

**INSTRUCTIONS**

1. You are encouraged to speak with your instructor prior to withdrawal.
2. Print firmly with a ballpoint pen.
3. Return the form to the Records and Registration, Eastern Academic, Fehsenfeld or Grahl Center office, or RMTCC office.

**DATE**

|                 |  |
|-----------------|--|
| NAME _____      | KCC ID or SOCIAL SECURITY NUMBER _____ |
| Last Name _____ | First Name _____ Middle Initial _____  |

**CHECK (✓) SESSION, ENTER YEAR**       FALL 20 \_\_\_\_       SPRING 20 \_\_\_\_       SUMMER 20 \_\_\_\_

| SUBJECT AREA | COURSE NUMBER | SECTION NUMBER | COURSE TITLE | CREDIT HOURS |
|--------------|---------------|----------------|--------------|--------------|
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|              |               |                |              |              |
|              |               |                |              |              |

**STUDENT SIGNATURE**

Signature \_\_\_\_\_ Date \_\_\_\_\_

**FOR OFFICE USE ONLY**

DATE RECEIVED \_\_\_\_\_  
BY (CLERK) \_\_\_\_\_