

Drop/Withdrawal Form

Fax: 361-698-1857 / Email: reginfo@delmar.edu

Student Name: _____ Student Phone: _____

IMPORTANT NOTES:

Complete the following information in its entirety. Incomplete information will prevent the processing of this request. Your request may not be processed if you have exceeded the allowable number of drops.

It is recommended that you visit with a Advocacy Specialist (361-698-1292) to discuss potential consequences of this decision. It is recommended that you visit with your Academic Advisor to discuss how this affects your academic plan to completion. If you are using Veterans Benefits of any kind, you should visit the Veterans Services office to verify any financial implications. *Make an informed decision!* Texas Senate Bill 1231 states that you may drop only six classes in your entire college career, including Del Mar College and any other Texas college or university you may attend. This rule applies only to students who began college in the fall of 2007 or later. It also applies to students who may have begun college before 2007 in another state but then transferred to a Texas college after the fall 2007 semester.

Allowable exemptions are:

- You have a severe illness
- You are caring for a sick or injured person
- You have a death in your immediate family
- Your work schedule changes beyond your control
- You go on active-duty service with the U.S. armed forces or Texas National Guard
- Other good cause

Note: If you are dropping CHEM 2123 Lab or CHEM 2125 Lab, you MUST submit verification that you have checked out of the laboratory. Please see the Natural Sciences Department to obtain this verification BEFORE submitting this form.

By signing this form, I certify my understanding that dropped courses will not be used to determine enrollment status and I may no longer be considered full-time status. I understand that dropping below full-time status may adversely impact financial aid eligibility, veteran's benefits, and other benefits that are dependent upon full-time enrollment status. INTERNATIONAL STUDENTS MUST RECEIVE APPROVAL FROM THE INTERNATIONAL STUDENT REPRESENTATIVE IN THE STUDENT RECORDS OFFICE BEFORE DROPPING BELOW FULL-TIME.

Student Signature: _____ Date: _____

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Student Name: _____ Student Phone: _____

Student ID: _____

Term: ☐ Fall ☐ Spring ☐ Maymester ☐ Sum I ☐ Sum II Year: _____

Courses for which drop is requested:

Course Prefix (Ex: ACCT), Course Number (Ex: 2301), Course Section (Ex: 001FA)

Course Prefix: _____ Course Number: _____ Course Section: _____

Course Prefix: _____ Course Number: _____ Course Section: _____

Course Prefix: _____ Course Number: _____ Course Section: _____

Course Prefix: _____ Course Number: _____ Course Section: _____

Please mark all that apply:

- ☐ I am USING FINANCIAL AID. Note: Dropping a course may affect your financial aid eligibility. I am an
- ☐ INTERNATIONAL STUDENT. If yes, you **cannot** drop below 12 credits.
- ☐ I am currently ENROLLED in HIGH SCHOOL.
- ☐ I am using VETERAN BENEFITS. (*You are advised to contact the VA office at 361-698-1683 for further assistance.*)

Please mark ONE reason for requesting this drop:

The following circumstances will not be considered as exceptions to the 6-course drop limit:

- ☐ Decided to not complete the course (changed your mind)
- ☐ Failing the course
- ☐ Other: _____

Select the following if you have a circumstance that MAY be considered as an exemption to the 6-course drop limit. Request for an exception must be made within 30 days of the last day of the course dropped.

- ☐ I have an extenuating circumstance and have attached appropriate documentation to request an exception from the 6 drop limit.
- ☐ I am completely withdrawing from all courses for this term

Student Signature: _____ Date: _____