

**ACADEMIC RECORDS OFFICE  
COURSE WITHDRAWAL REQUEST**

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Today's Date

\_\_\_\_\_  
BHCC ID#                      Last Name                      First Name                      Middle Name

Are you a Veteran:      Yes       No

**WITHDRAW:** A grade of "W" will be recorded. **NOTE:** Withdrawals are calculated as courses not completed and may adversely affect your academic standing.

\_\_\_\_\_  
Course Number                      Section                      Course Title                      Credits

\_\_\_\_\_  
Instructor/Advisor Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

\_\_\_\_\_  
Course Number                      Section                      Course Title                      Credits

\_\_\_\_\_  
Instructor/Advisor Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

\_\_\_\_\_  
Course Number                      Section                      Course Title                      Credits

\_\_\_\_\_  
Instructor/Advisor Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date