

Revised 04-15-20

Name: \_\_\_\_\_ CWID: T \_\_\_\_\_

Address: \_\_\_\_\_

Phone: (\_\_\_\_)\_\_\_\_-\_\_\_\_ City State Zip

TCC Email: \_\_\_\_\_@tulsacc.edu Semester: (Check One) \_\_\_\_\_ Fall \_\_\_\_\_ Spring \_\_\_\_\_ Summer

Are you requesting to be withdrawn from all of your classes?  **Yes**  **No**

**List all courses from which you wish to be withdrawn:**

CRN	Discipline	Course #	Section	Title

**Reason(s) for Withdrawal (Check all that apply)**

In response to the extraordinary challenges caused by the novel coronavirus COVID-19, Tulsa Community College continues to identify and support affected students. Please initial below if your reason for withdrawing is **NOT** directly or indirectly related to the COVID-19 pandemic.

\_\_\_ I acknowledge my request to withdraw is not related to COVID-19

**Academic Reasons**

- Dissatisfied with my academic performance
- Dissatisfied with the quality of teaching
- Dissatisfied with the learning environment
- Course level too advanced

**Financial Reasons**

- Could not obtain sufficient financial aid
- Not enough money to continue
- Was not able to purchase books

**Additional Reasons**

- Entered the military/deployment
- Illness/Life Crisis
- Personal Problems
- Moving out of the area
- College experience not what I expected
- Work related conflict

**Other**

\_\_\_\_\_

**Initials    Student Responsibility**

- ⇒ \_\_\_ I understand that I am responsible to pay any outstanding financial obligations to TCC.
- ⇒ \_\_\_ I understand a “W” or Withdrawal grade will be awarded on my transcript for the courses from which I am withdrawing.
- ⇒ \_\_\_ I understand the consequences of withdrawing and I accept that my financial aid status, current or future, may be affected.

⇒ **Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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**Financial Aid Recipients Only:**

**Affidavit of Enrollment**

For this current semester, I am enrolled and plan to enroll in additional courses that have not yet started. Failure to successfully complete future classes (including any that may be canceled due to low enrollment) may result in owing funds to TCC.

⇒ **Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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**Return this form in person to any campus Advisement Office to start the withdrawal process.**

*Distance Learning Students:* When returning by fax or if mailed to any campus Advisement Office:  
Include legible copy of a valid Driver’s license or Student ID.

***Advisement***

- Has the student notified the instructor (s)    **Yes**    **No**
- Has the student received academic advisement regarding withdrawal?    **Yes**    **No**
- Is the student receiving any type of financial aid?    **Yes**    **No**

Advisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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***Financial Aid***

Student Consequences:

\_\_\_ May result in re-payment of all or partial Title IV Funds

\_\_\_ May Place Student on Financial Aid Warning

\_\_\_ May Place Student on Financial Aid Suspension

\_\_\_ Other: \_\_\_\_\_

Completion Rate: \_\_\_\_\_ GPA: \_\_\_\_\_

Enrolled in upcoming parts of term? \_\_\_Yes \_\_\_No    Enrollment Status: Change to WD \_\_\_Yes \_\_\_No

Fin Aid Rep Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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***Enrollment Services***

Enrollment Status Changed    \_\_\_Yes \_\_\_No    Processed by: \_\_\_\_\_ Date: \_\_\_\_\_