

**ST. JOHNS RIVER STATE COLLEGE – STUDENT INITIATED COURSE WITHDRAWAL FORM**

SJR State Student ID # X00       Date \_\_\_\_\_ Term \_\_\_\_\_

Student's Name \_\_\_\_\_  
(Print) Last First Middle

Course Prefix & Number Section # (CRN) Course Title Instructor

HS DE Contact Initials Student's Signature High School

RETURN THE COMPLETED FORM TO THE RECORDS OFFICE (VIA DUAL ENROLLMENT OFFICE)

RO by \_\_\_\_\_ Date \_\_\_\_\_ DP by \_\_\_\_\_ Date \_\_\_\_\_

**(Note: Science lecture and lab requires two withdrawal forms. Complete one for each section.)**

**Reason:**

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