

WHITE MOUNTAINS COMMUNITY COLLEGE
2020 Riverside Drive, Berlin, New Hampshire 03570

COLLEGE WITHDRAWAL-Matriculated Students Only

NAME _____ ID # _____

Home Address _____

Reason for Withdrawal (check all that apply)

_____ AC/ Academic Concerns.

_____ EM/ Accepted Employment. In your field of study _____ Yes _____ No

_____ AF/ Armed Forces. Branch: _____

_____ CC/ Childcare.

_____ CG/ Career Goal Change.

_____ FN/ Financial.

_____ HI/ Housing Issues.

_____ MF/ Marriage and/or Family Responsibilities.

_____ PH/ Poor Health, self or family.

_____ RE/ Relocation.

_____ TR/ Transfer to another college. Which one: _____

_____ TS/ Time and/or scheduling concerns.

_____ TV/ Travel Concerns.

_____ OT/ Other. Explanation voluntary: _____

All other courses dropped would be indicated with a "W" on transcripts.

I understand by registering for courses at WMCC, I am financially obligated for ALL costs related to the registered course(s). Upon a drop or withdrawal, I understand that I will be responsible for all charges as noted in the student catalog and handbook. I further understand that if I do not make payment in full, my account may be reported to the credit bureau and/or turned over to an outside collection agency. I also understand that I will be responsible for the costs of the outside collection agency, any legal fees, and any bounced check fees under RSA 6:11, which will add significant costs to my account balance.

1. Student: _____

2. College Counselor: _____

3. Fin. Aid Administrator (if applicable) _____

For Registrar's Use: _____ Banner _____ Student File _____ Fin. Aid _____ Bus. Office

Date form Received: _____