



Withdrawal Form

North Georgia Technical College
Office of the Registrar
PO Box 65, Clarkesville, GA 30523
Phone: 706-754-7768 Fax: 706-754-7777
Email: registrar@northgatech.edu

ONLY complete and return this form to request **TOTAL WITHDRAWAL** from **ALL** courses.

Contact your instructor(s) to withdraw from **individual** courses while **maintaining enrollment** in others.

NGTC's Withdrawal Policy and Deadlines are published in the *College Catalog* available on www.northgatech.edu.

Any withdrawal, and the timing of the withdrawal, may impact:

- Enrollment status
- Satisfactory academic progress
- Student account balances
- Federal, state, and institutional grants, loans, scholarships and third-party sponsorships

Last Name: _____ First Name: _____
 Student ID # *or last 4 digits of Social Security #*: _____ Date of Birth: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: (____) _____ NGTC Email: _____

I request withdrawal from **ALL** classes for the year and term indicated below:
 Year: 20____ Term: Fall Spring Summer

Check **AT LEAST ONE** of the following options (required):

- I have consulted with my program advisor and/or instructor(s) and understand the impact of withdrawal.
- I have consulted with my financial aid advisor and understand the impact of withdrawal.
- I have NOT consulted with my advisor, instructor(s), or financial aid advisor, but understand the impact of withdrawal.

This form is not valid without your signature. Your signature affirms your request to withdraw from your North Georgia Technical College courses listed above and that you understand the impact of the withdrawal. The official date of the withdrawal will be verified with the instructor by the Registrar's Office.

Student's Signature: _____ **Date:** _____

Office Use Only		_____	_____	<input type="checkbox"/> Keyed in Banner
		<i>Registrar's Office Representative</i>	<i>Date Received</i>	
CRN (s) _____	<i>Date Last Attended</i> _____	CRN (s) _____	<i>Date Last Attended</i> _____	
_____	_____	_____	_____	
_____	_____	_____	_____	

As set forth in the student catalog, North Georgia Technical College does not discriminate on the basis of race, color, creed, national or ethnic origin, gender, religion, disability, age, political affiliation or belief, genetic information, disabled veteran, veteran status, or citizenship status (except in those special circumstances permitted or mandated by law). For complaints or information, contact Mike King, VP of Student Affairs (706-754-7711, Title VI, IX, II), or Kay Morgan, special services contact (706-754-7828, Sec. 504/Title I/ADA) at 1500 HWY 197 N, Clarkesville, GA 30523.

This institution is an equal opportunity provider and employer. If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov. 8/17/17