

## HUDSON COUNTY COMMUNITY COLLEGE ENROLLMENT SERVICES - CASS WITHDRAWAL FORM

MAY 2018 ENTERED BY				
Initials:				
Date:				

Used only after the conclusion of registration and/or only when the Withdrawal period is active. Withdrawal After Midpoint (WAM) form must be used if after withdrawal period

	PLEASE PR	INT:					
	LAST NAME		E FIRST	M.I.	CWID		
	TERM: PROGRAM/MAJOR:						
	Course Sec	tion & Number	Course Name	Credits	Comments		
	Please note: Students are subject to a \$15.00 charge for every withdrawal transaction, at any point, once each term/cycle begins.						
	any point, once each term, eyele begins.						
	Credits Before Change: Credits After Change:						
	Student's Sig	gnature:		Date:			
Office Use Only: PREM NOTATION – This document will be scanned							
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	MEDICAL						
	TRANSFER						
	EMPLOYMENT						
	FINANCIAL DIFFICULTY						
	PERSONAL						
	ADMINISTRATIVI	ADMINISTRATIVE WITHDRAWAL					
	OTHER						
Co	Comments:						
50.							
Co	Counselor's Signature: Date:						