



MORRIS BROWN COLLEGE WITHDRAWAL FROM THE COLLEGE

*(This form is to be used **ONLY** when student drops all courses)*

			<input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior	Fall	Summer	Spring
Term Data	Student ID#	Major	Classification	Semester and Year		
Name (Please Print)						
Last First MI						

REASON FOR WITHDRAWAL: Please select one

- | | | |
|---|--|---|
| <input type="checkbox"/> Academic Difficulty | <input type="checkbox"/> Educational Leave | <input type="checkbox"/> Health |
| <input type="checkbox"/> Employment/Work | <input type="checkbox"/> Housing | <input type="checkbox"/> Financial |
| <input type="checkbox"/> Childcare/Daycare Availability | <input type="checkbox"/> Military Call/Active Duty | <input type="checkbox"/> Transportation |

Transferring to:

Other:

NOTE: Student must submit this completed form to the Registrar’s Office by the deadline as listed on the academic calendar located at <https://morrisbrown.edu/academic-calendar/> or the withdrawal will not be allowed and grades will be assigned. Student may still be responsible for paying all or part of the tuition and fees depending on the date the withdrawal request is received by the Registrar’s Office.

CAUTION: Students withdrawing from one class to all classes from MBC after 1st class day will be charged for a percentage (%) of total tuition and fees based on the number of days in attendance. Please refer to page 39 of the MBC Catalog or <https://morrisbrown.edu/college-catalog/> for the Refund/Adjustment Schedule.

Advisor Signature

Financial Aid/CFO Signature

VP of Academic Affairs

Student Services

I understand that the Registrar’s Office will only process the semester and summer term(s) that I have checked above on this form. I also understand, if I have received a refund and/or the financial award is reduced due to the withdrawal, I may be responsible for returning up to the full amount of the refund back to MBC as well as paying for a percentage or all of the tuition and fees.

By checking the box, I acknowledge that I viewed the policies and procedures attached to this form.

Student Signature **Date**

Registrar **Date**