



Florence-
Darlington
Tech

FLORENCE-DARLINGTON TECH ADD/DROP/WITHDRAWAL FORM

PO BOX 100548 | FLORENCE, SC 29502-0548

DATA ENTRY USE ONLY

Date Keyed _____

By _____

GENERAL INFORMATION

PLEASE PRINT

Name _____
LAST FIRST MI ID #

Semester ☐ Fall ☐ Spring ☐ Summer Academic Year _____

COURSE INFORMATION

COURSES			Credit Hours	Last Date Attended (Month/Day/Year) Example: 01/30/00	Mark One Add Drop WD Audit	Instructor's Signature	Date Approved by Instructor
Prefix	Number	Section					

REASON FOR WITHDRAWAL/DROP

Please indicate below the reason for withdrawal/drop:

- | | | |
|--|---|--|
| ☐ Academic Difficulty | ☐ Course Too Difficult | ☐ Transferring |
| ☐ Changing Major | ☐ Employer/Work Issues | ☐ Medical/Family Illness |
| ☐ Computer Problems | ☐ Excessive Absences | ☐ Personal Issues |
| ☐ Course Not Required | ☐ Financial Difficulties | ☐ Relocating/Moving |
| ☐ Course Overload | ☐ Internet Course Problems | ☐ Scheduling Issues |
| | | ☐ Transportation Problems |

WITHDRAWAL CAUTION

Many courses are not offered every semester. Before withdrawing from a required or prerequisite course, you should consult with your advisor to be sure the course is offered again prior to your planned graduation date.

SIGNATURES

Financial Aid & Athletic Director signatures below are required only when dropping or withdrawing from a course(s).

STUDENT'S SIGNATURE _____ DATE _____

FINANCIAL AID ADVISOR SIGNATURE (Required if receiving financial aid) _____ DATE _____

ATHLETIC DIRECTOR SIGNATURE (Required for student-athletes) _____ DATE _____

WHITE COPY: RECORDS | YELLOW COPY: STUDENT