

# Orange Coast College

## Student Course Withdrawal Form

Year_____	Term_____
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\_\_\_\_\_  
DATE

\_\_\_\_\_  
STUDENT IDENTIFICATION NUMBER

\_\_\_\_\_  
LAST NAME

\_\_\_\_\_  
FIRST NAME

\_\_\_\_\_  
MI

CLASSES TO BE DROPPED:

COURSE REFERENCE NUMBERS (FILL IN THE 5 DIGIT COURSE REFERENCE NUMBERS IN THE SPACES PROVIDED)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	_____
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Course Reference Number    Course Name

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	_____
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Course Reference Number    Course Name

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	_____
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Course Reference Number    Course Name

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	_____
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Course Reference Number    Course Name

\_\_\_\_\_  
STUDENT SIGNATURE

<i>For Office Use Only</i>	
Date:_____	Initials_____