



CLOVER PARK TECHNICAL COLLEGE OFFICIAL ADD/WITHDRAWAL

ROUTE TO: _____

Student ID# _____ Year/Quarter _____

Last name _____ First Name _____ Initial _____

Street Address _____ City _____ State _____ Zip _____

Day Phone _____ Evening or Message Phone _____

ARE YOU?	
<input type="checkbox"/>	Program Funded
<input type="checkbox"/>	Financial Aid
<input type="checkbox"/>	Veteran
<input type="checkbox"/>	Running Start/EHS*
*Advisor's Signature Required	

Advisor's Signature	

WITHDRAWN CLASS

Class #	Class Title	Time	Bldg/Rm	Last Day In Class	Refund/Fees Due

ADDED CLASS

Class #	Class Title	Time	Bldg/Rm	First Day In Class	Instructor Approval May Be Required

Please check reason for leaving this college (check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> 1 Child Care
<input type="checkbox"/> 2 Completion of a modified course of study
<input type="checkbox"/> 3 Failure to meet program standards
<input type="checkbox"/> 4 Financial
<input type="checkbox"/> 5 Graduation from program
<input type="checkbox"/> 6 Language difficulties
<input type="checkbox"/> 7 Medical
<input type="checkbox"/> 8 Military duty
<input type="checkbox"/> 9 Moved | <input type="checkbox"/> A My chosen occupation did not require more training
<input type="checkbox"/> B Personal problems
<input type="checkbox"/> C Stopped attending
<input type="checkbox"/> D Transfer to another college or school
<input type="checkbox"/> E Transfer to another program
<input type="checkbox"/> F Transportation
<input type="checkbox"/> G Working – not related to training
<input type="checkbox"/> H Working – related to training |
|--|--|

I have returned all college owned equipment, books, and/or supplies. _____ (Student's initials)