

Great Falls College MSU Dual Enrollment DROP CARD

IF YOU ARE DROPPING A CLASS/CLASSES BEFORE THE DROP WITH A PARTIAL REFUND DEADLINE, THOSE CLASSES WILL NOT APPEAR ON YOUR ACADEMIC TRANSCRIPT. **YOU MAY STILL OWE A BILL TO THE COLLEGE.**

NAME: _____ STUDENT ID: _____ DATE OF BIRTH: _____
LAST FIRST

High School: _____ TERM: Fall Spring Summer YEAR: _____

IMPORTANT INFORMATION / DIRECTIONS

- Be sure to check with Student Accounts for any changes in tuition/fee assessment.
- **If you are dropping all of your classes you must fill out a complete withdrawal form.**
- If you are dropping a class after the deadline to drop online, you will receive a "W" on your transcript; this indicates that you did not complete the class but does not affect your grade point average, and you will still owe a bill to the College for those credits dropped.
- Once a course is dropped you are no longer allowed to attend or participate in the course.

Please return completed card to: GFC MSU; Registrar's Office, 2100 16th Avenue South, Great Falls, MT 59405, or Fax 406-771-4329

QUESTIONS:

With whom did you discuss your decision to drop your course (s) (check all that apply)? College Staff member Faculty member
 Advisor Fellow student Employer Relative High School staff member

Please indicate if the following reasons contributed to your dropping your course(s) from GFC MSU.

Academic:

- I'm unsure of my major/future goals
- My academic performance wasn't satisfactory
- I'm too far behind in my courses
- My course(s) are too challenging
- I wasn't ready for college

Online Courses

- I didn't receive adequate training/support with D2L
- My online classes weren't what I expected
- I don't have the technical skills needed for online classes
- I didn't have the hardware or software or proctoring resources needed for online classes

Campus Engagement

- I had negative interactions with faculty
- I didn't have the amount of faculty interaction I expected
- There was insufficient academic assistance available
- I didn't have a social connection with people at the college

Personal/Medical Issues

- I encountered unexpected changes in finances
- Employment interferes with academics
- I'm experiencing physical/emotional health-related problems
- A family member/friend is experiencing difficulties

Other: _____

FOR HIGH SCHOOL DUAL ENROLLMENT STUDENTS ONLY

DROP	CRN Number	Subject	Course No.	Section	Circle Current Grade	DC or CC*
						A B C D P F

* Please identify if this course was a Dual Credit (DC) course or a College-Credit-Only (CC) course.

Student Signature: _____ Date: _____

Faculty Signature: _____ Date: _____

Parent Signature (if student is under 18 years of age): _____ Date: _____

High school counselor/Principal Signature: _____ Date: _____

College counselor/Advisor Signature: _____ Date: _____

BY YOUR SIGNATURE, YOU ARE REQUESTING THAT THE COLLEGE DROP YOU FROM THE REQUESTED CLASS

Drop Entered by: _____ Date: _____

Survey Entered by: _____ Date: _____