Withdrawal/Drop Form

Use to withdraw from all Racer Academy courses or drop an individual course.

Student Information:

M Number, MSU ID (*if known*) _____

Student Name _____

Date of Birth _____

Name of High School _____

Semester   Fall .... Spring   Year _____

Course(s) to be Dropped _____

Reason for Dropping:

_____

_____

Student Signature (do not print) _____ Date_____

Guidance Counselor Signature_____ Date_____

MSU Registrar's Office Signature_____ Date_____