

SOUTHWEST

TENNESSEE COMMUNITY COLLEGE

TENNESSEE EDUCATION LOTTERY SCHOLARSHIP (TELS) REQUEST TO WITHDRAW FROM SCHOOL OR DROP A CLASS

PRINT Name _____ SSN _____ Date _____

Address _____ City _____ ST _____ ZIP _____

A request to withdraw from school or class for the _____ 20__ semester is necessary because of:

Illness Call to Military Duty Work Schedule Other _____

At least one of the following forms of documentation MUST be provided with this form. YOUR REQUEST WILL BE DENIED IF DOCUMENTATION IS NOT ATTACHED.

1. A statement from your employer verifying an unexpected change in work schedule or unexpected out-of-town travel AFTER the first day of class
2. Legal documentation which will verify your explanation
3. Medical statement with dates of illness, that verify your illness
4. Documentation verifying you, your spouse, your child, your father, or your mother was called to Active Military Duty during the school term

Written Explanation:

Student Signature

Date

Approved Denied _____

Southwest School Official
TELS Office

Date

