

WITHDRAWAL FORM

Last Name:		First Name:	
Sheridan Student ID:			
Date of Birth (dd/mmm/yyyy):			
Name of Home School:			
SCHOOL BOARD			
<input type="checkbox"/> Dufferin-Peel CDSB	<input type="checkbox"/> Peel DSB	<input type="checkbox"/> Halton CDSB	<input type="checkbox"/> Halton DSB

COURSE WITHDRAWAL	
<input type="checkbox"/> EARLY CHILDHOOD EDUCATION	<input type="checkbox"/> PLUMBING
<input type="checkbox"/> OPERATING SYSTEMS	<input type="checkbox"/> INTRODUCTION TO CONSTRUCTION
<input type="checkbox"/> ELECTRICAL	<input type="checkbox"/> INTRODUCTION TO INDUSTRIAL TRADES
<input type="checkbox"/> PRECISION MACHINING/WELDING (STDWD)	<input type="checkbox"/> HALTON ELECTRIC
<input type="checkbox"/> SCHOOL WITHIN A COLLEGE (SWAC)	
REASON FOR WITHDRAWAL	
<input type="checkbox"/> Attendance:	<input type="checkbox"/> Medical <input type="checkbox"/> Personal
<input type="checkbox"/> Course not as expected (specify):	
<input type="checkbox"/> Other (specify):	
ADDITIONAL INFORMATION	

	Print Name	Signature	Date DD/MMM/YYYY
School Board Dual Credit Representative			
Sheridan College - Dual Credit Program			
Student's Signature			