



QUINCY COLLEGE

Quincy Campus Registrar
1250 Hancock Street, Quincy, MA 02169
(p) 617-984-1650 | (f) 617-984-1794

Plymouth Campus Registrar
36 Cordage Park Circle, Plymouth, MA 02360
(p) 508-747-0400 | (f) 508-747-8169

Withdrawal Form

A photo ID is required for all transactions.

Current Semester:

- Fall Winter Spring Summer I Summer II

Payment Method:

- I receive Financial Aid I receive Veteran Benefits A third party employer is billed for my tuition

Quincy College Official Use

Date Received: _____

Student ID#: _____

First Name	Middle Name	Last Name	Student ID #
Street	City	State	Zip Code
Phone Number	Social Security # (last 4 digits) XXX-XX- _____		

Please **PRINT** the courses you would like to withdraw from.

Course Code	Course Title

Important Note: Even if you withdraw, you may still owe money. You must pay outstanding balances in full. Please check the My QC Campus Portal or meet with the Student Accounts Office to review your account.

By signing below, I understand that I must pay any outstanding balances in full to Quincy College.

Signature

Date

Please Note: The official date of withdrawal is the day the Registrar's Office receives written notice of withdrawal.

CERTIFIED (For Quincy College Official Use)

Date: _____

Processed by: _____