



Dual Credit Student Drop Form

Name of Student*: _____ Blinn ID*: _____

Current High School*: _____ Class of: _____

I am requesting to drop the classes listed below and understand the following:

- The 6-Drop-Rule does not apply to dual credit students but withdrawing from a college course can potentially affect a student's Satisfactory Academic Progress (SAP) rate and future financial aid <https://www.blinn.edu/financial-aid/keeping-your-aid/sap.html>.
- All registration deadlines indicated on the Blinn College Academic Calendar and refund schedule must be followed if dropping from dual credit courses.
- I must email this completed form, including all required signatures to the Dual Credit Office at dualcredit@blinn.edu.

I am requesting to drop the following courses:

Course Name*	Semester/Year*

By signing and submitting this form, I am giving consent for the student to be dropped from the dual credit course(s) listed above.

Student Signature*

Date

Parent Signature*

Date

High School Designee Signature *

Date

*Required

1/2022