

Admissions Office 3441 Mountain Empire Road Big Stone Gap, VA 24219

(276) 523-7474 Fax: (276) 523-8297

## High School Official's Permission to Drop

 $(Required\ of\ all\ high\ school\ students\ enrolling\ for\ classes\ on\ the\ MECC\ Campus\ or\ MECC\ Online\ classes)$ 

Student Name					Student ID		
***						•	
High School					Expected Graduation Year		
Term (check	cone):	) Summer	O Fall	Spring	Academic Year:		
Class Number	Subject	Catalog#	Section		Course Title	Never Attended	Attended
Reason for D	rop:						
Last Date of	f Attendance:						
		<u> All</u>	fields must b	e filled in before re	equest can be processed.		
	Students dropp will not be invo				eted and removed from Class/Grade	Roster(s). High s	chool
	After 15% up to Invoiced for tu				t will remain on Class/Grade Roster	. High School w	rill be
	60% -100% stud Invoiced for tu				will remain on Class/Grade Roster.	High School w	rill be
	This is to	o certify that tl	ne student liste	ed above has permi	ssion to drop the course(s) listed abov	ve.	
Signature of High School Official Title						Date	
For Office Use	Only: Processed	by::		Date: _			