COLLEGE OF MICRONESIA - FSM YAP CAMPUS P.O. Box 286 Colonia, Yap, FSM 96943 Phone: (691) 350-2296 P.O. Box 879 Weno, Chuuk, FSM 96942 Phone: (691) 330-2689 P.O. Box 159 Palikir, Pohnpei, FSM 96941 Phone: (691) 320-2480 Office of Admissions, Records and Retention www.comfsm.fm POHNPEI CAMPUS KOSRAE CAMPUS FSM FMI P.O. Box 37 Tofol, Kosrae, FSM 96944 Phone: (691) 370-3191 P.O. Box 1056 Colonia, Yap, FSM 96943 Phone: (691) 350-5244 P.O. Box 614 Kolonia, Pohnpei, FSM 96941 Accredited by the Western Assocaiton of Schools and Colleges (WASC) Phone: (691) 320-3795 Year Spring Summer Fall For Instructor Use Name (Last Name, First Name, Middle Initial) Campus or Site Date **COURSE NO. COURSE SECTION COURSE TITLE CREDIT ROOM** DAY TIME Instructor (Signature over printed name) Student has returned all books and materials YES NO Date or Office of Admissions, Records & Retention **RECORDED BY JOB TITLE DATE RECORDED** Notes: 1. This form is for Instructor initiated withdrawals only

Signed & complete form is forwarded to the Office of Admissions, Records & Retention

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WITHDRAWAL CARD For Instructor Use				Spring Summer Fall				
Name (Last Name, First Name, Middle Initial)				Campus or Si	te	D	ate	
COURSE	COURSE NO.	SECTION	COURSE TITL	E	CREDIT	ROOM	DAY	TIME
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