



Ranger College
1100 College Circle
Ranger, TX 76470

(254)267-7019
transcripts@rangercollege.edu
RangerCollege.edu

Complete Withdrawal Form

Internet, Erath County and Brown County Campuses

Student ID: _____ Student Name: _____

1. What was your goal at Ranger College?

2. Did you achieve your goal? _____

3. What could the administration have done to better assist you in achieving your goal?

To withdraw from all classes, mail or email this form to the Registrar's Office. The official withdrawal date will be the date the form is received by the Registrar's Office. You will remain on the course roster(s) until the end of the semester but will receive a "Q" in all the class(s).

Email: transcripts@rangercollege.edu

Mail: Registrar's Office, Ranger College, 1100 College Circle, Ranger, TX 76470

I understand that this form must be properly received in the Registrar's Office before my withdrawal and grade of Q is official.

Student Signature: _____

Date: _____

Last Date of Attendance: _____

To be completed by Registrar's Office

Date Received: _____

RO Initials: _____