



OCCEMT
EMERGENCY MEDICAL TRAINING

ORANGE COUNTY EMT
26489 RANCHO PKWY SOUTH
LAKE FOREST, CA 92630

Course Withdrawal Procedure

Any student enrolled in the course who voluntarily decides to withdrawal must complete and sign the document below:

I, _____ am requesting to withdrawal from OCEMT Class _____ which I am currently enrolled. Any refunds related to the course will be issued according to the refund policy found in the Course Catalog within 45 days of the date below. By signing below I acknowledge that I will not be receiving a course completion certificate and must re-enroll in the course if I choose to take it again.

Reason For Withdrawal:

Student Signature

Date

Administration

Date