**Official Withdraw**

**Student Information:**

S #: Phone #: Phone # (Alternate):

First Name: Middle Name Last Name:

**Please check all that apply to you.**

[ ]  I am receiving financial aid *(work-study, loan, scholarships, etc.)* [ ]  I am receiving Veteran’s Affairs benefits.

**Reason for Withdrawal**

Please check all that apply to you. If you are required to withdraw due to military, please see further instructions\*.

 [ ]  Attending college elsewhere [ ]  Financial [ ]  Military\*

 [ ]  Personal / Health [ ]  Relocating [ ]  Other

**Financial Aid Advisor**

* Financial obligation information was reviewed (implications on financial aid, book charges, college property, etc).
* Loan Exit Counseling completed.

Financial Aid Advisor Signature: Date:

**Academic Advisor**

* The impact of a withdrawal on academic standing was reviewed.
* I have advised the student and have explored all possible means of retention.

Academic Advisor Signature: Date:

**VA Advisor**

VA Certifying Official Signature: Date:

# Student Agreement & Signature

My signature certifies that I am aware of the impact withdrawal has upon future enrollments. I understand that I am financially responsible for my tuition, fees, and, if necessary, collection fees.

Student Signature: Date:

*Please return to Go!Zone or Admissions & Records*

# Admissions & Records Use Only

Processed by: Date:

***\**** *Please submit your Military Orders to Admissions & Records VA Certifying Official to review the options available to you. This applies to service in the uniformed services, on active duty in the Armed Forces, including the National Guard or Reserve, for a period of more than 30 days under a call or order to active duty of more than 30 days.*