



HOOD COLLEGE WITHDRAWAL – UNDERGRADUATE

Student Name: _____ Student ID: _____ Date: _____

STEP 1: Meet with CAAR/Academic Services to discuss your situation and determine if this is the best course of action.

CAAR Signature: _____ Date: _____

Rosenstock 3rd floor; (301) 696-3569

STEP 2: Meet with Accounting to discuss your billing statement. **Accounting Signature:** _____ Date: _____

Alumnae Hall 2nd floor; (301) 696-3607

STEP 3: Meet with Financial Aid to discuss the impact a Leave of Absence may have on your student loans.

Financial Aid Signature: _____ Date: _____

Joseph Henry Apple 3rd floor; (301) 696-3411

STEP 4: Meet with Dean of Students. **Dean Signature:** _____ Date: _____

Alumnae Hall 2nd floor; (301) 696-3573

STEP 5: If you are an international student attending on an F-1 visa, you must also obtain the signature of the

College Primary Designated School Official (PDSO). **PDSO Signature:** _____ Date: _____

STEP 6: Return this completed form with signature to the Registrar’s Office; registrar@hood.edu or Joseph Henry Apple 2nd floor

Expected Graduation Date: _____ **Major:** _____ **Academic Advisor Name:** _____

Current Status: (check all that apply) Commuter Resident Full-time Part-time Leave of Absence

Effective Date of Withdrawal: _____

1. Reason for Withdrawal: Transfer (College) _____ Academic: (Specify) _____

Church Mission Employment Financial Health Living Conditions Moving

Military Service Personal No Reason Other: _____

Please explain reason(s): _____

2. What do you like best about Hood College? _____

3. What do you like least about Hood College? _____

4. What could Hood do to meet students’ needs more effectively? _____

5. Will you recommend Hood to others? _____

6. Is there anything that would change your decision to withdraw? _____

Student Signature: _____ **Date:** _____

Residential Students Only: Departure from Room: Within 24 hours of either the “Effective Date of Withdrawal” you write on this form or submit to the Office of the Registrar, you must move out of your room and return your room key and Hood College ID card to the Whitaker Campus Center front desk Campus Safety Switchboard staff (open 24/7). You should inform your Resident Assistant and roommate you are moving out. Your room should be cleaned and all of your belongings must be removed. Any questions please contact residencelife@hood.edu or call 301-696-3577.

For Office Use Only: Admit/Matric Term & Year _____ FTF _____ Transfer _____ WD Code Entered: _____