

**HOOD COLLEGE – WITHDRAWAL – UNDERGRADUATE**

**NAME:** \_\_\_\_\_ **ID#** \_\_\_\_\_

**Matriculation Date: (FTF / TR)** \_\_\_\_\_ **Expected Grad Date:** \_\_\_\_\_

**Current Status:** 1.  Commuter  Resident  
(Check 1 & 2) 2.  Full-time  Part-time **TODAY'S DATE:** \_\_\_\_\_

**MAJOR:** \_\_\_\_\_ **ADVISER:** \_\_\_\_\_

**1. Effective Date of Withdrawal:** \_\_\_\_\_

**Reason for withdrawal:**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Transfer (College)  | _____  |  |
| <input type="checkbox"/> Academic: (Specify) | _____  |  |
| <input type="checkbox"/> Academic dismissal  | <input type="checkbox"/> Church Mission            | <input type="checkbox"/> Deceased              |
| <input type="checkbox"/> Employment          | <input type="checkbox"/> Financial                 | <input type="checkbox"/> Health                |
| <input type="checkbox"/> Living Conditions   | <input type="checkbox"/> Military Service          | <input type="checkbox"/> Perm Disability       |
| <input type="checkbox"/> Personal            | <input type="checkbox"/> Did not return from leave | <input type="checkbox"/> Moving                |
| <input type="checkbox"/> No Reason           | <input type="checkbox"/> Failed to register        | <input type="checkbox"/> Changed to non-degree |
| <input type="checkbox"/> Schedule Conflicts  | <input type="checkbox"/> Non-academic dismissal    |  |
| <input type="checkbox"/> Other:              | _____  |  |

**Please explain reason(s):** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**2. Of the reasons described above, which is the primary reason for leaving Hood?** \_\_\_\_\_

**3. What do you like best about Hood College?** \_\_\_\_\_

**4. What do you like least about Hood College?** \_\_\_\_\_

**5. What could Hood do to meet students' needs more effectively?** \_\_\_\_\_

**6. Will you recommend Hood to others?** \_\_\_\_\_

**7. Is there anything that would change your decision to withdraw?** \_\_\_\_\_

**SIGNATURES NEEDED:** \_\_\_\_\_ **Residence Life** \_\_\_\_\_  
**Financial Aid** \_\_\_\_\_ **Accounting** \_\_\_\_\_  
**Dean of Students** \_\_\_\_\_ **Student Success LB 1025** \_\_\_\_\_  
 **Exit interview conducted – Signature** \_\_\_\_\_ **Date** \_\_\_\_\_  
**Student** \_\_\_\_\_ **Date** \_\_\_\_\_