

NOTIFICATION OF STUDENT WITHDRAWAL

Print Name _____

PLU Student ID _____

Permanent Street Address _____

(____) _____ - _____ - _____
Phone

City _____

State _____

Zip _____

Email _____

1. Withdraw Term/Semester:

Summer 20____ Fall 20____ J-Term 20____ Spring 20____

2. Are you an:

Undergraduate Graduate Non-Matriculate International

3. Do you receive financial aid?

Yes No

If you had a Stafford Student Loan or Perkins/Nursing Loan during your attendance at PLU, federal regulations require you to complete an Exit Interview before leaving the university. Contact the Student Services Center.

4. Would you like to use a portion of your loans (if applicable) to cover any owing balance? Yes No

5. Have you deposited and/or been accepted for a study away program? If YES, you must notify the Wang Center?

Yes No

6. Do you plan to return to PLU?

Yes Readmit Term _____ Year 20____

No Unsure

You must reactivate enrollment with the Student Services Center, 3 weeks prior to the term you re-enter.

7. Are you transferring?

Yes What school will you be attending _____
 No

8. Do you have the PLU Health Insurance Plan?

Yes No

9. Why are you leaving Pacific Lutheran University? Please check all that apply.

PERSONAL

- Family/personal health related problems
- Need time away from studies
- Moving or transferred to new location
- Commuting distance too great
- Childcare problems
- Family responsibilities
- Emotional problems
- Felt racial/ethnic tension
- Felt disconnected
- Want to live closer to family
- Taking time to travel
- Uncertain of my future plans
- Roommate difficulty
- Church Missionary Work

INSTITUTIONAL

- Desired major not offered
- Academic Advising was inadequate
- Class scheduling problems
- Unhappy with university rules/regulations
- Problems with university faculty/staff
- Dissatisfied with social life
- University is too liberal
- University is too conservative

FINANCIAL

- Insufficient financial aid received
- Tuition and fees not affordable
- Inadequate student employment
- Need time to make money for school
- Billing problems

ACADEMIC

- Classes are too difficult
- Classes are not challenging
- Too many required classes
- Disappointed with quality of teaching
- Taking prerequisites elsewhere

EMPLOYMENT

- Want to obtain work experience
- Accepted a full-time job
- Conflict between demands of job and school

10. Is there anything that the University might do to help you remain a student?

11. _____ Your initials

Completion of this form will automatically terminate your room and meal contracts. However students currently residing on campus are required to check out of their room with the Residence Hall Staff. Room and meal charges continue to accrue, until a Room Condition Report is completed and the room is vacated. Check out with any RA or RD from your building.

12. SIGNATURE: _____

Date: ____/____/____

SSVC COUNSELOR: _____

Date: ____/____/____

OFFICE USE ONLY

SSVC Counselors **MUST** complete Step 1 & 2, then forward to Kathy Hodge to process.

STEP 1

BANNER PROCESS

1. DD any classes not started
 - ◆ (2nd half semester classes)– part of term (3)
2. F6 any DD classes
 - ◆ F10, F10 save (optional to clean up schedule)
3. Eligibility Block change EL to **(circle which code used)**
 - ◆ WD - use until the 10th day, F10, F10 save
 - ◆ WG – use after the 10th day, F10, F10 save
 - ◆ (WD/WG codes automatically fills in for class registration)
 - ◆ NA – (Never Attended) Starts 1st day of classes
(NA code automatically fills in)
4. Shift F7- (Rollback to the top)
5. Eligibility Block, Shift + F2 (SFAREGS back screen)
 - ◆ WD – status, F10 **(circle WD when completed)**
6. Control + Q = Quit

BEFORE SEMESTER BEGINS & SUMMER WITHDRAWS

1. DD all classes
2. F10, F10 to save
3. Follow directions (on left #3)

Refund % _____ Charged % _____ (Must be filled in by SSVC Counselor)
Did student *attend* this term/semester? or Did student *never attend* this term/semester?

STEP 2

Stafford Exit (RHIAFSH)

- Completed by Student
- Sent /Given to Student (circle one)
- Posted in RRAAREQ
- N/A

Refund Request

- Refund Request Completed
- N/A
- Account Balance \$ _____

Promissory Note (Business Office)

- Completed
- Needs to be completed
- N/A

Perkins Exit (RHIAFSH)

- Perkins Exit (Directions Given)
- Student not present
- N/A

Nursing Exit (RHIAFSH)

- Nursing Exit (Directions Given)
- Student not present
- N/A

ID Card

- Attached
- Never Attended

Health Insurance

- If student has PLU Health Insurance, I have informed the student about termination date and contact information.
- N/A Student not present

SSVC Counselor: _____ Date: ____/____/____

STEP 3 (Kathy Hodge)

Send Copies To:

- | | | |
|--|-----------------------------------|------------------------------|
| <input type="checkbox"/> Student | | |
| <input type="checkbox"/> Admissions | All New Students | Tracy Comstock |
| <input type="checkbox"/> FAID (Detail Attached) | All Students | Lorie Staab |
| <input type="checkbox"/> Business Office (Detail Attached) | All Students | Ryan Olsen |
| <input type="checkbox"/> Business Office | All Recipients of Perkins/Nursing | Erika Borell/Fawn Goetz |
| <input type="checkbox"/> International Student Office | All International Students | Akane Yamaguchi/Rick Eastman |
| <input type="checkbox"/> Registrar | All Undergraduate Students | Joann Nelson |
| <input type="checkbox"/> RLO | Students with room/meal charges | Dana McDonald |
| <input type="checkbox"/> LuteCard Office | Students with only meal charges | Valerie Seeley |
- (send copy only if ID card attached)**

Sent Email (No paper copies needed)

- | | | |
|---|--|-------------------|
| <input type="checkbox"/> Academic Advising | jonesmm@plu.edu | Academic Advising |
| <input type="checkbox"/> Campus Employment | martinpi@plu.edu | Pam Martin |
| <input type="checkbox"/> Counseling and Testing | countest@plu.edu | |
| <input type="checkbox"/> Health Center | splintdk@plu.edu | Doreen Splinter |
| <input type="checkbox"/> Wang Center | benstocl@plu.edu | Charry Benston |
| | bieberpk@plu.edu | Pat Bieber |
| | lidensj@plu.edu | Sue Liden |
-
- | | | |
|--|---------------------|--------------------------|
| <input type="checkbox"/> FIOP (Health Insurance) | | |
| Graduate Students | | |
| <input type="checkbox"/> MBA | School of Business | Director of MBA Graduate |
| <input type="checkbox"/> MS Nursing | School of Nursing | Amy Manoso |
| <input type="checkbox"/> Education | School of Education | Barbara Fresh |
| <input type="checkbox"/> All others | Admissions | Jessica Winer |

Master List

- On Master List
- WD for Agnt (SSVC Initials)
- N/A (Not applicable)

REVISED NOTIFICATION OF STUDENT WITHDRAWAL 04/14/09

COMMENTS: