



MILITARY MOBILIZATION WITHDRAWAL

Effective Date: ___/___/___
Student Name: _____ (print)
Student ID: _____
Address: _____
E-mail: _____
Phone: (____) _____ - _____

Withdraw: [] SUMMER _____ YEAR [] FALL _____ YEAR [] J-TERM _____ YEAR [] SPRING _____ YEAR

Are you a Graduate [] Undergraduate: [] Non-Matriculated []

Do you live On-Campus [] Off-Campus []

Do you have a Meal Plan? [] YES [] NO

1. Do you receive Financial Aid? [] YES* [] NO

*NOTE: If you received a Stafford Student Loan or Perkins/Nursing Loan during the time you attended PLU, federal regulations require you to complete Exit Counseling before leaving the University.

2. Do you plan to return to PLU? [] YES (if known, when) TERM _____ YEAR _____ [] NO [] UNSURE

3. Are you taking a complete withdrawal ? [] YES [] NO

4. If not, are you requesting incompletes for your classes? [] YES [] NO

5. Have you made arrangements with your Instructor for an incomplete? [] YES [] NO

6. Emergency contact: Name: _____ Phone: (____) _____ - _____

- 7. Have you submitted the following:
• Copy of Military Orders
• Copy of Power Attorney (use Financial Aid POA if needed)
• Military Mobilization Withdrawal Form
• Surrender of PLU Identification Card
• Emergency Contact Information

8. _____ (initial understanding of statement) Completion of this form will automatically terminate your room and meal plan contracts based on the effective withdrawal date above. However, residential students are required to complete a Room Condition Report with Residential Hall Staff and vacate their residence hall room by the effective date noted above.

You are responsible for reactivating your enrollment with the Student Services Center, at least 3 weeks prior to the term you re-enter.

8. Signature: _____ Date: _____

OFFICE USE ONLY

Refund Percentage _____ Stafford Exit _____ Drop Classes _____
Notify Student Life _____ Perkins/Nursing Exit _____ Shift+F2, WD, F10 _____
ID Card Attached _____ WD or WG and Term _____
SSVC COUNSELOR: _____ DATE: ___/___/___