



## DICKERSON-GREEN THEOLOGICAL SEMINARY WITHDRAWAL FORM

WITHDRAWAL TERM (CIRCLE ONE): SPRING    FALL    SUMMER    YEAR \_\_\_\_\_

**INSTRUCTIONS** *(This form should be used by the student who wants to officially withdraw from the Dickerson-Green Theological Seminary):* Fill in all of the information and obtain the appropriate signatures below. Once all of the required signatures have been obtained, please **RETURN THE FORM TO THE OFFICE OF THE DICKERSON-GREEN THEOLOGICAL SEMINARY**. Failure to complete and return this form in its entirety may result in additional fees and/or the loss of financial aid.

**Please Print:**

<b>Campus-Wide ID</b>	<b>Name</b> <i>(Last, First, Middle)</i>	<b>Semester</b> <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer	<b>Year</b>
<b>Email Address</b>	<b>Mailing Address</b> <i>(Street, City, State, Zip)</i>	<b>Contact Number</b>	

**WHY ARE YOU WITHDRAWING FROM THE DICKERSON-GREEN THEOLOGICAL SEMINARY?** *Select all that apply:*

- |   |   |                                     |  |
|---|---|-------------------------------------|--|
| <input type="checkbox"/> Financial  | <input type="checkbox"/> Family Obligations | <input type="checkbox"/> Employment | <input type="checkbox"/> Military Service      |
| <input type="checkbox"/> Relocating   | <input type="checkbox"/> Personal           | <input type="checkbox"/> Medical    | <input type="checkbox"/> Other, Please Explain |
| <input type="checkbox"/> Transferring to Another College/Seminary – If so, where? |   |                                     |  |

**Exit Interview and Signatures are required with:**

Academic Advisor: \_\_\_\_\_

Financial Aid: \_\_\_\_\_

Library/Learning Resource Center: \_\_\_\_\_

Business and Finance: \_\_\_\_\_

VA Certifying Official: \_\_\_\_\_

Dickerson-Green Dean: \_\_\_\_\_

Dickerson-Green Administrative Asst.: \_\_\_\_\_

Registrar: \_\_\_\_\_

Your withdrawal will result in an adjustment of tuition and fees:

From: \$ \_\_\_\_\_

To \$ \_\_\_\_\_

I understand that I will need to be re-admitted through the Office of the Dickerson-Green Theological Seminary when/if I choose to return. I understand that I am responsible for any unpaid accounts and no records will be released until all financial obligations have been met.

STUDENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

TO BE COMPLETED BY THE OFFICE OF THE REGISTRAR:

WITHDRAWAL APPROVED     WITHDRAWAL PENDING

EFFECTIVE DATE OF WITHDRAWAL: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

REGISTRAR \_\_\_\_\_ DATE \_\_\_\_\_  NSLDS UPDATED \_\_\_\_\_