

NORFOLK STATE UNIVERSITY
OFFICE OF THE REGISTRAR

APPLICATION FOR WITHDRAWAL FROM THE UNIVERISTY

(Please Print)

TERM OF WITHDRAWAL: Fall Spring Summer (Check only one) YEAR: _____

DATE OF WITHDRAWAL: ____/____/____ ID# _____

NAME: _____
LAST FIRST MI

PERMANENT ADDRESS: _____
STREET APT#
CITY STATE ZIP CODE

TELEPHONE: (____) _____

Reason for Withdrawal (Circle One):

- 01 Financial Problems
- 02 Illness/Injury
- 03 Insufficient Financial Aid
- 04 Maternity
- 05 Entered Military
- 06 Other _____
- 07 Personal Problems
- 08 Decided On Another School
- 09 Study Abroad
- 10 Unknown

Are you receiving VA benefits? Yes No

Are you an NSU Athlete? Yes No

Do you live in the residence hall? Yes No

Compliance Officer Signature Required

I understand the following: (1) any financial obligation due the University such as tuition, library books, fines, financial assistance, housing charges, etc. must be paid. (2) If I am contracted with University housing, I am required to vacate and return my keys within 24 hours of withdrawal. (3) My Spartan Card will be deactivated within 24 hours of withdrawal. (4) Financial Aid Awards are subject to review and reduction or cancellation as a result of withdrawal. I will be notified of adjustments by the Financial Aid Office.

Signature of Student

Date

Signature of Advisor / Designee

Date

Requested Via: Letter In Person Other

Exit Interview: _____

Signature of Counselor

Date

Veteran's Office: Cleared by _____

Date

Housing: Cleared by _____

Date

() Issue Copy to Student () Notify Spartan Card Office () EDW _____

Financial Aid

_____ No Aid

\$ _____ Pell Grant

\$ _____ Ford Subsidized Loan

\$ _____ Ford Unsubsidized Loan

\$ _____ Other _____

\$ _____ Other _____

\$ _____ Other _____

Financial Aid _____ Date

Student Accounts _____ Date

Loan Default Manager _____ Date

Registrar _____ Date