

## **OFFICIAL STUDENT WITHDRAWAL FORM**

Name:			SSN: xxx – xx –		
FNU ID:		Program: _	Dro	Drop date:	
Campus: Hialeah Ca	mpus 🗌	South Campus	Distance Learning ☐	Training Center □	
Indicate reason(s) for withdrawing from Florida National University: (Check all that apply)					
$\square$ Transferring to a different College/University			<ul> <li>Did not qualify to receive financial aid</li> </ul>		
			<ul> <li>Courses were not academically challenging</li> </ul>		
Health related problems			<ul><li>Could not find baby-sitting services</li></ul>		
Conflicts with job schedule			<ul> <li>Personal family problem</li> </ul>		
$\square$ Unsatisfied with the instructors			□ COVID – 19		
$\square$ The course(s) was/were too difficult			Other (explain below)		
Relocating					
☐ Tuition/monthly payments were more than I could afford					
How can we, at Florida National University, assist you with the situation you indicated above?					
I understand that it is highly advised I visit the Financial Aid Office before completing the withdrawal. I am aware that withdrawing from Florida National University may affect my financial status at the University, and I take full responsibility for any additional financial obligation that may result from my withdrawal. It is the responsibility of the student to contact the Financial Aid Office 14 days after the official drop date to obtain information on his/her final balance with the university.					
Student Signature (for Official Withdrawal)		ndrawal)	Date		
FOR OFFICIAL USE ONLY					
Office of Academic Advising:  Academic Advisor has contacted Program Director/Division Head to inform him/her of the withdrawal. In the case of an I-20 (International Student) the International Student Advisor has been informed.					
Academic Advisor			Date		
Office of Bursar:  Account has been checked to see if student is up to date with monthly payments. If student was behind on payments, student was advised.					
Bursar			Date		
Campus Dean			Date		