



# Withdrawal Form

☐ Official – Student Initiated

☐ Unofficial- Administration Initiated

Please complete all the requested information and submit to the Registrar.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Permanent Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Student ID Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Please indicate the Reason you are withdrawing from Benjamin Franklin Institute of Technology

Check all that apply:

**Academic Reasons**

- \_\_\_\_\_ Achieved Academic Goals
- \_\_\_\_\_ Need a break from school
- \_\_\_\_\_ Violation of Academic Policy
- \_\_\_\_\_ Courses/Programs not available
- \_\_\_\_\_ Dissatisfied with my academic performance
- \_\_\_\_\_ Dissatisfied with the quality of teaching
- \_\_\_\_\_ Dissatisfied with the learning environment
- \_\_\_\_\_ Transferring to another School\*\*

**Other Reasons**

- \_\_\_\_\_ Conduct code violation
- \_\_\_\_\_ Achieved my personal goals
- \_\_\_\_\_ Accepted a job
- \_\_\_\_\_ Entered the military
- \_\_\_\_\_ Moved out of area
- \_\_\_\_\_ School conflicts with work
- \_\_\_\_\_ Other responsibilities became too great
- \_\_\_\_\_ Illness
- \_\_\_\_\_ Personal Problems
- \_\_\_\_\_ Did Not Return/Non Attendance
- \_\_\_\_\_ Other\*\*

**Financial Reasons**

- \_\_\_\_\_ Not enough money to continue
- \_\_\_\_\_ Could not obtain sufficient financial aid

\*\*Explanation: \_\_\_\_\_

Do you plan to return to the school?

Yes, what semester \_\_\_\_\_ No \_\_\_\_\_ Not sure \_\_\_\_\_

What was your housing status? \_\_\_\_\_ Commuter \_\_\_\_\_ Resident

Please obtain the following signatures

Dean of Students: \_\_\_\_\_

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

Student Accounts: \_\_\_\_\_

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

*I understand that withdrawing from Benjamin Franklin Institute of Technology does not relieve me from my financial obligation to the school. Furthermore, I understand that withdrawal may affect my financial aid and I assume full responsibility for any additional financial obligation.*

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**Office Use Only**

Date of Withdrawal: \_\_\_\_\_ Date of Determination: \_\_\_\_\_ FA. Exit Sent: \_\_\_\_\_

Degree Listing Updated \_\_\_\_\_ HOLDS Updated \_\_\_\_\_ Doc Tracking Updated \_\_\_\_\_