

# **DAWN CAREER INSTITUTE**

## **Request for Withdraw**

### **PERSONAL INFORMATION:**

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Program: \_\_\_\_\_ Day/Evening: \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

E-mail: \_\_\_\_\_

### **Reason for Withdraw:**

(Circle one of the following or write the reason on the line next to "Other")

Medical

Family

Child Care

Financial

Personal

Academic

Other: \_\_\_\_\_

### **Description:**

(Please describe in depth why you are requesting to withdraw from Dawn Career Institute)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**By signing below, I understand that this is not an official withdraw from Dawn Career Institute, and my withdraw will not be official until approved by the school's administration.**

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

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

For school office use only:

Received by / Date: \_\_\_\_\_

Approved by / Date: \_\_\_\_\_

Entered into COSDB by / Date: \_\_\_\_\_