

Student Clearance

As a student, you may find it necessary to enter a leave of absence or withdraw from school at any time during your academic career. It is important that you fully understand the consequence of your change in student status. Use this form as a check list for meeting with each of the student service offices, and return this signed form to your academic department.



Student Information

Student Name

Student ID

Academic Program

Student Service Clearance:

Financial Aid Office:

Signature of Financial Aid Officer

Date

Registrar's Office:

Signature of Registrar

Date

Student Housing: *not applicable*

Signature of Student Housing Representative

Date

Business Office:

Signature of Business Office Representative

Date

Waiver of Student Clearance Requirement

I have authorized a waiver of the student clearance requirement for the above named student. Due to special circumstances, I believe it is in the best interest of the student to not fulfill this requirement.

Signature of Academic Department Granting Authority

Date