## E NEW SCHOOL

## **Student Exit Form**

Advised: Y / N Date: SEVIS: Y / N Date:

Office of the University Registrar 72 Fifth Avenue New York, NY 10011 Tel 212.229.5620 Fax 212.229.5648

A. Student Information:	ID#: N				
Name (Last)	(First)				
Telephone ()			ttps://my.newschool.edu		
If your contact info has changed, please update change of address, phone or e-mail at https://my.newschool.edu					
Division/Program[ ] Parsons (New Yorl[ ] Parsons (Paris)	k) [ ] Lang [ ] Drama	[] NSSR [] Mannes	[ ] NSPE [ ] Jazz		
Degree/Diploma/Dept					
B. Student: Please obtain signatures from the offices below and/or review the links provided if they apply to you.					
[ ] Financial Aid – Students who receive Financial Aid should review important information at the following link regarding the impact of an Exit on Financial Aid eligibility. http://www.newschool.edu/forms/sfs_withdrawal_leave.pdf					
[ ] International Students – International Students should review information at the following link regarding the impact of an Exit on their status. <a href="http://www.newschool.edu/studentservices/international/cs_withdrawal.aspx">http://www.newschool.edu/studentservices/international/cs_withdrawal.aspx</a>					
[] Housing			Date		
[]HEOP			Date		
[ ] Department/Academic Advisor			Date		
<ul> <li>[] attendance roster [] last exam/project [] self-report [] other</li></ul>					
Reason for Exit:       [] Family       [] Health       [] Transfer       [] Financial       [] Career         [] Study Away       [] Military       [] Program Fit       [] Personal       [] Other         If the student is exiting for Health Reasons and/or is currently enrolled in the Student Health Insurance Plan, please         provide the student with the Student Health Information Guidelines.         Is the student an International Student?       [] Yes       (student must return to ISS after approval of Exit Form for final processing)					
Student Signature (If student is unable to sign form, please attach corr	espondence from	Date Student initiating th	e exit.)	Registrar: Classes: Y / N Refund:	
Division Approval Signature CC: Registrar's Office / Division / Student / ISS (ha	nd delivered by Int	Date ernational Student	s)	Initial/Date:	