



## Med College

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### Student Withdrawal Form

Student Name:	SS#:
Address:	Withdraw Date/LDA:
Phone:	Program:

Please, read and answer by checking one of the reasons below

- Decided to attend a different school
- Health related problems
- Job schedule
- Unhappy with the instructor
- The course was too demanding
- Relocating
- Tuition and fees were more that I could afford
- Courses not sufficiently challenging
- Could not find baby-sitting services
- Personal family problems
- Did not receive financial aid

**Other/Comments:** Student was reported absent last two classes and has not communicate with anyone at the school after attempts to reach her by text and email.

\_\_\_\_\_  
School Officer's Signature

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Reported Non-attending by (Instructor)

\_\_\_\_\_  
Date