## GRAY SHARBOROLLEGE

## WITHDRAWAL FROM ALL CLASSES

Must be completed by an advisor or counselor in the Student Suppertter

Quarter (Mark all that apply)					
SU	F	_ W	_SP	YEAR	Today'sDate:
1	Have the financia	l aid conseg	uences and	nossible renavme	ant details been explained to
<ol> <li>Have the financial aid consequences and possible repayment details been explaingedut@ <u>Please note you may owgerepayment</u>. Yes No</li> </ol>					
	Please note	<u>you may o</u>	wærepayme	ent. Yes	No
2.	The major reason(s) you angithdrawing. (Circle all thatapply)				
	Finances	Family Iss	ues	Childcare	Employment Illness
	Transportation	Relocation	ו	Transfer to anot	ner school Issues related to COVID19
	Financial A	Aid issues (F	Pleasapecify)		
Academidssue≰Pleasœpecify)					
		-			
	Other (ple)	ase snecify	)		
3.	Did you receive V	eterans Ben	efits? No	Yes tlf yes,F	Please contact GHC Veterans Service at (360)538-4273
4.	How would you r	ate your ov	erall experie	ence at Grays Ha	ntoollege?

Excellent Good