## Hendrix College Leave of Absence or Withdrawal Application Form

Section 1—General Information				
Name		ID #		
Permanent Address				
Street, City, State, Zip				
_		itial Enrollment Year Advisor		
Permanent Phone Number		Campus/Local Phone Number		
Section 2—Status Requested (check or	ne):			
period. Students with Leave one year of the Leave of Abs	of Absence stati ence semester.	intended for students who plan to return to Hendrix within a one-year us do not have to reapply to return to the College if they return within at plan to return to Hendrix. Students who withdraw must reapply for		
Section 3—Reasons for Leave or WithAcademicFamily		one) ialMedicalOther		
·		pected date of return if taking a Leave of Absence		
•				
•	•			
• Mrs. Julie Brown       505-2954         • Mrs. Christy Coker       450-1330         • Mr. Charnley Conway       450-1482         • Mr. Jim Wiltgen       450-1422         • Dr. Eva Windsor       450-1246	ng is complete.  4	ator, Academic Services		
Interviewer Signature		Date		
Section 5—Signatures				
Academic Advisor	Date	Assoc Provost for Advising & Retention Date		
Business Office	Date	Is the student in good financial standing?yesno Is a Perkins loan exit interview required?yesno Has the board plan been discontinued?yesno		
Dean of Students	Date	Are there any judicial situations pending?yesno		
Financial Aid	Date	Student has been informed of financial aid issues that stem from this Leave of Absence or Withdrawalyesno		
		Are there outstanding Library books/fines?yesno		
Librarian	Date	IF ANY OF THE ABOVE RESPONSES IS YES,		
Director of Residence Life	Date	PLEASE ATTACH A SEPARATE SHEET FOR NOTES.		
Submitted by:		Approved by:		

## **Hendrix Exit Feedback Form**

We would appreciate your assistance in helping the College understand the factors that influence the decisions of students who leave Hendrix. The list below represents a number of reasons that may have influenced your decision to take a leave of absence or withdraw from Hendrix. Please **circle the most appropriate response** to each item to indicate if this item was (1) a major reason, (2) a minor reason, or (3) not a reason that you have decided to leave the college. You do not have to respond to all items, but we would welcome your feedback to as many items as possible.

## 1 – Major Reason 2 – Minor Reason 3 – Not a Reason

Maj.	Min.	Not		Maj.	Min.	Not	
Institutional:				Encountered unexpected expenses	1	2	3
College facilities were inadequate	1	2	3	Financial aid received was			
Impersonal attitudes of faculty				inadequate	1	2	3
and staff	1	2	3	Tuition and fees were more			
Location of the College	1	2	3	than I could afford	1	2	3
Size of the College	1	2	3	Personal:			
Unhappy with College policies	1	2	3	Experienced emotional problems	1	2	3
Academic:				Family responsibilities were	•	_	3
Academic advising was				too great	1	2	3
inadequate	1	2	3	Felt alone or isolated	1	2	3
Couldn't decide on a major	1	2	3	Felt racial or ethnic tension	1	2	3
Courses were too difficult	1	2	3	Health-related problems	1	2	3
Desire to attend a different				Influenced by parents or relatives	1	2	3
college	1	2	3	Learned all I wanted to learn			
Desired curriculum or major not				at this time	1	2	3
offered	1	2	3	Personal or family reasons	1	2	3
Didn't feel challenged	1	2	3	Other:			
Disappointed with the quality				Accepted a full time job	1	2	3
of instruction	1	2	3	My chosen occupation does not	•	-	
Dissatisfied with my grades	1	2	3	require more college	1	2	3
Experienced class scheduling				Uncertain about the value of a	•	-	
problems	1	2	3	college education	1	2	3
Inadequate study habits	1	2	3	Wanted a break from my college	-	_	
Too many required courses	1	2	3	studies	1	2	3
Student Life:	1	2	3	Wanted to get work experience	1	2	3
Dissatisfied with the social life	1	2	3	Wanted to travel	1	2	3
Had conflicts with roommate(s)	1	2	3				
Quality of life in residence halls	1	2	3	Other factors:	1	2	3
Financial:					_ 1	2	3
Applied for financial aid but					1	2	3
did not receive it	1	2	3		- 1	_	5
Could not find part time or summer	•	_	3		1	2	3
work to support attendance	1	2	3			_	
work to support attendance	•	_	٥				
Comments:							

## RETURN THIS COMPLETED FORM TO THE OFFICE OF THE REGISTRAR

	FOR REGISTRAR'S OFFICE USE:							
	Notification to parent/guardian mailed(Date)							
	Notification to: Academic Advisor, Academic Affairs, Academic Support Services, Admissions, Associate Provost for							
Advising and Retention, Business Office, Cafeteria, Chaplain, Counselor, Dean of Students, Financial Aid, Information								
	Technology, Library, Post Office, President, Professors, Residence Life, Security, Student.							
	Copy to: Academic Advisor, Academic Affairs, Academic Support Services, Associate Provost for Advising and							
	Retention, Business Office, Dean of Students, Financial Aid, Post Office, Student.							