



THE NORWALK CONSERVATORY OF THE ARTS

Withdrawal Request Form

Student Information:

- Full Name: _____
- Student ID: _____ Date of Birth: _____
- Contact Number: _____ Email: _____

Academic Details:

- Program/Department: _____
- Year of Study: _____ Semester/Quarter: _____
- Expected Graduation Date: _____

Withdrawal Details:

- Reason for Withdrawal (please select one):
- Academic Reasons
 - Personal Reasons
 - Financial Reasons
 - Health Reasons
 - Other (please specify): _____

Briefly explain your reason for withdrawal:

- Last Date of Attendance:
- Financial Obligations:



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- All financial obligations to the Conservatory have been settled.
- I have outstanding financial obligations. (Please specify): _____
- Return of Conservatory Property:
 - All Conservatory property has been returned.
 - I have Conservatory property to return. (Please specify): _____
- Transcripts and Records:
 - I have reviewed the process for obtaining academic transcripts and records.
 - I have additional questions about transcripts and records.

Next Steps:

- I understand that I may be required to participate in an exit interview.
- I have reviewed the withdrawal policies outlined in the Conservatory handbook.

Student Declaration:

I, the undersigned, declare that the information provided in this form is accurate and complete. I understand the consequences of my withdrawal from The Norwalk Conservatory of the Arts and agree to comply with all relevant procedures and requirements.

Student Signature: _____ Date: _____

Submission Instructions:

Please submit this completed form to the Office of the Registrar. If you have any questions, contact registrar@thenorwalkconservatory.org.