



MID-AMERICA

Withdrawal Information

Name _____ Date _____

Date of Birth _____ Sex: Male _____ Female _____

Present Address _____

Telephone _____

Date entered MABTS: _____ Year in School: 1 2 3 4 4+

Term currently enrolled: 1 - 2 - 3 - 4 - Summer (Circle One)

Program in which you are enrolled _____

1. How many semesters have you enrolled at Mid-America? _____

2. Have you attended a seminary other than Mid-America? _____

3. Have you withdrawn from Mid-America before? _____

When? _____

4. What circumstances are causing you to withdraw from school?

_____ Academic _____ Employment _____ Family Illness/Death

_____ Financial _____ Health _____ Housing

_____ Personal _____ Transfer _____ Other

Please explain _____

5. Is there anything that we can do to help you to stay in school?

6. Have you discussed your problem and plans with any of the following?

_____ Administration

_____ Friends

_____ Family

_____ Professors

_____ Business Office

_____ Staff Members

Other _____

7. Are you receiving any financial aid?

_____ Local Church

_____ G. I. Bill

_____ Social Security

_____ None

Other _____

8. What are your plans for the immediate future? _____

9. While at Mid-America, how would you describe your participation in Seminary activities?

_____ High

_____ Average

_____ Low

10. How do you feel about the degree of academic success you have achieved at Mid-America or another school?

_____ Very Satisfied

_____ Satisfied

_____ Not Satisfied

11. Do you plan to return to Mid-America or another school?

12. What is your impression of Mid-America?

13. How do you feel about your experience here?

14. What could Mid-America have done to make your stay here more productive?

15. Additional comments:

Signature

YOU MUST HAVE THE FOLLOWING PERSONS SIGN THIS FORM BEFORE SUBMITTING TO THE ACADEMIC RECORDS OFFICE FOR PROCESSING:

_____ **Director of Library Services**

_____ **Dean of Men/Women**

**UPON COMPLETING THIS FORM AND GETTING THE ABOVE SIGNATURES,
PLEASE SUBMIT TO THE ACADEMIC RECORDS OFFICE.**

For Interoffice Use Only

_____ **Director of Practical Missions**

_____ **Director of Campus Life**

_____ **Dean of Grad. & Undergrad. Programs**

_____ **Chief Financial Officer**

_____ **Academic Vice President**

_____ **President**

