



Separation Form

Name: _____ Student ID number: _____

This is a request for: **Graduation from CLU** Expected Degree date: _____

Separation from CLU Reason for Separation: _____

I will _____ will not _____ complete the present semester.

Leave of Absence: Summer _____ Fall _____ Spring _____

Forwarding Address: _____

Street

City

State

Zip

Signature: _____

Date: _____

Students separating from CLU must obtain clearance from the following offices before the request becomes effective. Please return this form, when completed to the Registrar's office.

Office	Department Signature	Date
Student Accounts (Business Office)	Account review and exit counseling required on Perkins Loans	
Financial Aid	Return of Federal Funds calculation and exit counseling for Stafford Loans required.	
Library/ISS (Circulation Desk)	All books returned	
Welcome Center		
Mail Center	Close your mailbox	
Residence Life (Mogen Hall)	Complete Residence Life checkout process	
International Services (Student Union Building)	International Students only—See Juanita Hall	
Career Services (Dining Commons)	Graduating seniors only	
Alumni Relations(2 nd floor Administration Bldg)	Graduating seniors only	
Registrar (Administration Building)	Final step—Turn in completed form	