

# Academic Course Exit Form

## Student Information

Full Name

Student ID

Program

Email

## Course Details

Course Code

Course Title

Instructor Name

Semester/Year

## Reason for Course Exit

Please select one of the following

If other or additional details, please explain:

## Checklist

- ☐ All course materials and resources have been returned.
- ☐ Exit counseling completed (if required).
- ☐ Academic advisor has been informed.

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Student Signature

Date

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Advisor/Instructor Signature  
Date

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