

*A resignation is a permanent separation from The Cooper Union Albert Nerken School of Engineering.
There is no possibility to return.*

Student Information:			
Student LAST Name:	[PRINT CLEARLY]		
Student FIRST Name:	[PRINT CLEARLY]		
Student Major:	<input type="checkbox"/> BSE <input type="checkbox"/> CE <input type="checkbox"/> ChE <input type="checkbox"/> EE <input type="checkbox"/> ME	Grade Level:	<input type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th <input type="checkbox"/> Grad
Residential Address:			
Contact Information:	Email:		Phone:
Are you an International Student?	<input type="checkbox"/> Yes* <input type="checkbox"/> No	*If yes, please have DSO sign: _____ Date: _____	

Resignation Information:	
Date of Departure:	Date: _____
Reason for Resignation:	<input type="checkbox"/> Medical <input type="checkbox"/> Military <input type="checkbox"/> Family <input type="checkbox"/> Personal <input type="checkbox"/> Other: _____

Explain Reasoning(s) of Departure:
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- - - STOP HERE: Please save file as is and email document to Betsy Quitugua in the Dean's Office. Betsy will take care of signatures. - - -

Required Signatures:		
Student Signature:	(Sign) _____	Date: _____
Student Advisor Signature:	(Print) _____ (Sign) _____	Date: _____
Dean Signature:	(Sign) _____	Date: _____