



Office of Enrollment Management

CLASS ATTENDANCE VERIFICATION FORM  
OFFICIAL RESIGNATION

6 W X G H Q W T V 1 D P H B B B B B B B B B B B B B B B B B B - \_\_\_\_\_ Semester: \_\_\_\_\_

A federal aid recipient who officially resigns for a V H P H V W H U L V V X E M H F W W R / 6 8 T V I H G H T U O C A L I B H A Y B E R E Q U I R E D O N S E M I N A R S based on the resignation date and whether the student is able to establish eligibility for the aid disbursed