

FOURTH CLASS WITHDRAWAL PROCEDURE

This form must be completed in its entirety prior to receiving REQUEST FOR DISCHARGE (Yellow Card) from the Registrar's Office.

Part I: General Information (TO BE COMPLETED BY THE 4TH CLASS CADET).

Name: _____ Company: _____ CWID#: _____

Gender: ☐ MALE ☐ FEMALE Ethnicity: _____ Legacy: ☐ NO ☐ YES

Participated in Inside the Gates Visit: ☐ NO ☐ YES Participated in CSI Program: ☐ NO ☐ YES

NCAA Scholarship Athlete: ☐ NO ☐ YES (Sport _____)

ROTC Scholarship: ☐ Air Force ☐ Army ☐ Navy/Marine

Academic Scholarship recipient? ☐ NO ☐ YES (Name of scholarship _____)

Contacted Scholarship Provider(s): ☐ YES ☐ NO (***Must be contacted before seeing the Deputy Commandant***)

State of legal residence: _____ Major: _____

Parent or Guardian Name: _____

Address: _____ Cell Phone #: _____

City/State: _____ Home/Work Phone #: _____

Why did you choose to attend The Citadel? _____

Why are you choosing to withdraw from The Citadel? _____

▪ Have you been subjected to any violation of the Fourth Class System? ☐ ***I have /** ☐ **I have not**

**Have you been prevented from eating enough, been verbally or physically abused, been interrupted during ESP or when sleeping, or any other violation you deem inappropriate? (If so, please state all pertinent facts to include what, when, how, and by whom on an attached sheet).*

▪ Have you been sexually harassed, abused or assaulted? ☐ **NO** ☐ **YES**

▪ Have you been hazed ? ☐ **NO** ☐ **YES**

If yes, how, when, and by whom?

▪ Have you been discriminated against based on gender, race, ethnicity, or sexual orientation? ☐ **NO** ☐ **YES**

If yes, how, when, and by whom?

Have you told your parents about your decision to withdraw? ☐ **NO** ☐ **YES- If yes, when?** _____

Do your parents support your decision? ☐ **NO** ☐ **YES**

Cadet's signature: _____ Date: _____

PART II (Continue comments on back if needed):

➤ **Cadet Company Commander:** _____ *Concur* _____ *Non-concur*

COMMENTS: _____

Signature: _____ Date: _____

➤ **Company TAC Officer:** _____ *Concur* _____ *Non-concur*

COMMENTS: _____

Signature: _____ Date: _____

➤ **Battalion TAC Officer:** _____ *Concur* _____ *Non-concur*

Contacted Parents: ☐ YES ☐ NO (***Must be contacted before seeing the Deputy Commandant***)

COMMENTS: _____

Signature: _____ Date: _____

PART III: Deputy Commandant OR Assistant Commandant (Jenkins Hall, 2nd floor):

I have interviewed this cadet and forward cadet's request with the following comment(s) and recommendation(s):

The consent (telephone call by BN TAC) of the cadet's parents/guardian ☐ *has been* ☐ *has not been* obtained.

Request/Direct that the cadet report to:

- ☐ President ☐ Provost ☐ CARE ☐ Chaplain ☐ Clinic ☐ Coach
☐ PMS ☐ PAS ☐ PNS (Scholarship cadets) ☐ Title IX ☐ Director of Multicultural Student Services & International Studies (International Cadets)

(If cadet is referred to any of the above please fill out Part IV below. If not, go directly to Part V).

Deputy Commandant or Asst. Commandant's Signature: _____ Date: _____

PART IV: Referral comments from Part III (if more than one referral, as indicated in Part III above, continue additional referral(s) on back and include the ➤ below)

I have interviewed this cadet and forward this request with the following ➤comment(s) and ➤recommendation(s):

➤ Name/Signature: _____ ➤ Date: _____

PART V: Enrollment Management (Bond Hall, Rm. 153):

I have interviewed this cadet and forward this request with the following comment(s) and recommendation(s):

Signature: _____ Date: _____

PART VI: Military Secretary Office of the President (Bond Hall, Rm. 189):

Signature: _____ Date: _____

PART VII: Go to Registrar's Office (Bond Hall, Rm. 173)

and pick up *REQUEST FOR DISCHARGE* (Yellow Card):

Signature: _____ Date: _____