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 Pre-Knob Visit: 🗆 NO 🛛 YES	Participated in CSI	Program: 🗆 NO 🗆 YES
NCAA Athlete: NO YES (Sport)	
ROTC Scholarship: Air Force Army Navy/Ma	rine	
State of legal residence: l	Major:	
Scholarship recipient? \Box NO \Box YES (Name of scholarship)	arship)
Parent or Guardian Name:		
Address:	_ Cell Phone #:	
	Home/Work Pho	ne #:
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 F	ourth Class System?	I have / I have not
 *Have you been prevented from eating enough ESP or when sleeping, or any other violation y to include what, when, how, and by whom on Have you been sexually harassed, abused or ass Have you been hazed ? NO YES 	ou deem inappropriate an attached sheet).	
If yes, how, when, and by whom?		
■Have you been discriminated against based on g	ender, race, ethnicity	, or sexual orientation? NO YES
If yes, how, when, and by whom?		
Have you told your parents about your decision to we Do your parents support your decision? \Box NO \Box N	1 thdraw? \Box NO \Box YE	S- It yes, when?
\square	YES	

PART II (Continue comments on back if needed):

≻Cadet Company Commander:	ConcurNon-concur	
COMMENTS:		
Signature:	Date:	
Company TAC Officer:Conc	urNon-concur	
COMMENTS:		
Signature:	Date:	
Battalion TAC Officer:Conce	urNon-concur	
Contacted Parents: ☐ YES ☐ NO (<u>Mu</u>	<u>st</u> be contacted before seeing the Deputy Commandant)	
COMMENTS:		
Signature:	Date:	
PART III: Deputy Commandant OR Ass	sistant Commandant (Jenkins Hall, 2 nd floor):	
I have interviewed this cadet and forward cadet's	s request with the following comment(s) and recommendation(s):	
The consent (telephone call by BN TAC) of the ca	det's parents/guardian \Box has been \Box has not been obtained.	
Request/Direct that the cadet report to:		
□ President □ Provost □ CARE □ Chaplain □ □ □ PMS □ PAS □ PNS (Scholarship cadets) □ T	Infirmary Coach Citle IX Director of Multicultural Student Services & International Studies (International Cadets)	
(If cadet is referred to any of the above pleas	se fill out Part IV below. If not, go directly to Part V).	
Deputy Commandant or Asst. Commandant's Si	gnature: Date:	
III above, continue additional referral	t III (if more than one referral, as indicated in Part (s) on back and include the > below) quest with the following >comment(s) and >recommendation(s):	
≻Name/Signature:	_>Date	
PART V: Office of the Provost (Bond H	Iall, Rm. 369):	
I have interviewed this cadet and forward this red	quest with the following comment(s) and recommendation(s):	
Signature:	Date	
PART VI: Executive Assistant to the P	resident (Bond Hall, Rm. 189):	
Signature:	Date	
PART VII: Go to Registrar's Office (Bor and pick up REQUEST FOR DISCHARG		