



the evergreen state college
olympia, washington

TO: Faculty

FROM: Tracy Hall, Director of Financial Aid

DATE: _____

RE: Name: _____

ID#: **A**_____

Qtr: _____

The above mentioned student has or is in the process of withdrawing from enrollment in your class. Financial Aid is required to verify attendance. Please check/complete one of the following.

This student:

☐ Never attended the first day/meeting

☐ Attended at least one day/meeting

Date last attended or submitted work, date: _____
month day year

☐ Other: _____

Program Title: _____ Date: _____

Faculty Name: _____ Signature: _____

Thank you for your prompt response. Please return to:

Barry P. Bailen
Financial Aid Office
Library Building

Office of Financial Aid