

# ILLINOIS COMMUNITY COLLEGE BOARD ADULT EDUCATION AND LITERACY

## Student Separation Form

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Last 4 digits of SSN or Student ID#: \_\_\_\_\_

Birth date: \_\_\_\_\_

Separation Date: \_\_\_\_\_

**Separation Reason (Check one):**

<input type="checkbox"/>	1. Entered Employment
<input type="checkbox"/>	2. Met Personal Objective
<input type="checkbox"/>	3. Lack of Interest, Instruction Not Helpful to Participant
<input type="checkbox"/>	4. Illness/Incapacity
<input type="checkbox"/>	5. Lack of Transportation Resources
<input type="checkbox"/>	6. Lack of Dependent/Childcare Resources
<input type="checkbox"/>	7. Family Problems
<input type="checkbox"/>	8. Time and/or Location of Services Not Feasible
<input type="checkbox"/>	9. Moved
<input type="checkbox"/>	10. For Other Known Reasons
<input type="checkbox"/>	11. Cannot Locate or Contact