

COVID Withdrawal Attestation

Student Name:	GCO Student Number:	
•	fied my Student Services Counselor that I am withdrawing from Grand no longer be a student due to COVID-19 (a.k.a. Coronavirus, SARS -CoV	
include, but are not limited t or first responder, loss of chi	9 is leading to the withdrawal from the University (allowable circumston), my illness or the illness of a family member, need to become a careguldcare, economic hardship, inability to access WI-FI due to closed facility as a result of the COVID-19 emergency):	iiver
Student Signature:	Date:	

WARNING:

Intentionally providing false or misleading information on this form may subject you to federal prosecution and penalties including fines, imprisonment, or both.

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