Postsecondary Removal Form

Student Name: _____ TDCJ #: _____

Unit: _____

Instructions

Use this form to request removal from one or more postsecondary education interest lists.

Only the interest lists listed on this form will be removed. If you wish to be considered for any of these programs again in the future, you must submit a new Postsecondary Education Interest Form. Any interest lists not listed below will remain unchanged.

Interest List(s) to Be Removed

Please write the name of each postsecondary education interest list from which you would like to be removed.

1. _____
2. _____
3. _____

Reason for Removal Request

Please explain why you are requesting removal from the interest list(s) listed above:

_____

_____

_____

Certification

I am requesting removal from the interest list(s) identified above. I understand that I will only be removed from the interest list(s) listed on this form. I also understand that if I wish to be considered for any of these programs in the future, I must submit a new Postsecondary Education Interest Form.

Student Signature: _____ **Date:** _____

Advisor / Designee Signature: _____ **Date:** _____

Advisor / Designee Printed Name: _____ **Campus:** _____

All documents should be submitted to postsecondary@wsdtx.org