

College of Business Administration Withdrawal Questionnaire

We are asking you to participate in this survey because you have asked to withdraw from the College of Business Administration. Your feedback is essential in our efforts to continually improve our program. THANK YOU in advance for your participation.

(Optional) Name: _____ (Optional) ID#: _____

Today's Date: _____

Date you began at NU: _____ Year of graduation: _____ Concentration: _____

Are you a Transfer student? (Please circle) Yes or No If yes, External or Internal

1. Why did you choose the NU College of Business Administration for your undergraduate studies?

- | | |
|--|---|
| <input type="checkbox"/> Co-op | <input type="checkbox"/> Faculty |
| <input type="checkbox"/> Location | <input type="checkbox"/> Friends/Family |
| <input type="checkbox"/> Scholarship/Financial Aid | <input type="checkbox"/> Affordability |
| <input type="checkbox"/> Reputation/Education | <input type="checkbox"/> Other: _____ |

2. What were your professional/educational goals at the time you entered NU? Check all that apply.

- Obtain a degree
- Gain work experience through Co-op
- Receive a good education
- Other: _____

3. Why are you withdrawing from NU? Check all that apply.

(If more than one reason, please also number by importance. For example: 1, 2, 3)

- | | |
|---|--|
| <input type="checkbox"/> Financial reasons (Check all that apply)
___ Insufficient financial aid
___ Scholarship/Grant ran out
___ Savings depleted
___ Loans no longer an option
___ Other: _____ | <input type="checkbox"/> Disliked academic offerings |
| <input type="checkbox"/> Did not feel connected to the University | <input type="checkbox"/> Low grades |
| <input type="checkbox"/> Did not feel connected to my classmates | <input type="checkbox"/> Too difficult |
| <input type="checkbox"/> Did not like the faculty | <input type="checkbox"/> Transferring to another school |
| | <input type="checkbox"/> Medical reasons |
| | <input type="checkbox"/> Received full time offer from Co-op job |
| | <input type="checkbox"/> Family Issues |
| | <input type="checkbox"/> Other: _____ |

4. What are you planning to do after leaving NU?

- Attend other college: _____
- Enter the military service
- Look for a job
- Already secured job
- Travel
- Other: _____

College of Business Administration Reasons for Withdrawal

	<i>Major reason</i>	<i>Moderate reason</i>	<i>Minor reason</i>	<i>Not a reason</i>
<u>Academic</u>				
Course/program I wanted was not available	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Change in academic goals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Low grades	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dissatisfaction with my Academic Advisor Reason: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Co-op/Employment</u>				
Could not find a Co-op job	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did not like the Co-op experience Reason: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accepted a full time job	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dissatisfaction with my Co-op Advisor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Went into military service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Financial</u>				
Change in financial circumstances	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insufficient financial aid	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not enough on-campus work-study opportunities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Faculty/Coursework</u>				
CBA Coursework too challenging	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CBA Coursework not challenging enough	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not enough faculty contact	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Poor instruction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>School Environment</u>				
Not enough social opportunities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not enough cultural opportunities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did not fit in with school population	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student population not diverse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class size too large, list course: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dissatisfaction with customer service Example: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Personal Circumstances</u>				
Dislike location	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family relocated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Change in my marital status	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical, personal or family	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>