



UNIVERSITY of HAWAII®
HAWAII
COMMUNITY COLLEGE

Student ID: _____

Loan Exit Counseling Statement of Continuation

I, _____, will not be graduating or transferring from Hawaii
(First Name, Last Name)
Community College in Spring _____ and will be returning for the Fall _____ semester. I am
(YYYY) (YYYY)
not required to complete my loan exit counseling at this time, but understand I am required to
do so during my last term at Hawaii Community College.

Expected Graduation Date (MM/YYYY): _____

Student Signature: _____

Date: _____