INSTRUCTOR-INITIATED DROP/WITHDRAWAL FORM

STUDENT NAME: ____________________________

LAST __________ FIRST __________ M.I. __________

STUDENT ID NO. ____________________________

CRN __________ SUBJ __________ CRSE __________ SEQ __________ DAYS __________ TIMES __________ UNITS __________ INSTRUCTOR __________

Please check one: ☐ Summer ☐ Fall ☐ Spring TERM: 199 __________

THIS STUDENT HAS STOPPED ATTENDING/PARTICIPATING IN THIS CLASS. PLEASE REMOVE THIS STUDENT'S NAME FROM MY CLASS ROLL.

________________________________________
INSTRUCTOR SIGNATURE

________________________________________
DATE

- THIS FORM MAY BE FILED WITH THE OFFICE OF ADMISSIONS AND RECORDS ANY TIME PRIOR TO THE LAST DAY FOR WITHDRAWAL.

- IF THIS FORM IS FILED PRIOR TO THE LAST DAY TO DROP, NO NOTATION WILL APPEAR ON THE STUDENT’S PERMANENT RECORD.

- IF IT IS FILED BETWEEN THE LAST DAY TO DROP AND THE LAST DAY FOR WITHDRAWAL, A “W” SYMBOL WILL APPEAR ON THE STUDENT’S PERMANENT RECORD.

- THIS FORM MAY NOT BE FILED AFTER THE LAST DATE TO ASSIGN A “W” SYMBOL. STUDENTS REMAINING IN CLASS AFTER THIS DATE MUST BE ASSIGNED A SYMBOL (CONSISTENT WITH THE GRADING POLICIES) OTHER THAN “W”.

Rev. 3/90

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