

III. STUDENT SECTION – CONTINUED

EXTENUATING CIRCUMSTANCES WHICH JUSTIFY DROP REQUEST

(Attach appropriate documentation or give name of individual who can verify circumstances – i.e., physician, employer, etc. If your reasons are of a very personal nature, you may wish to state those reasons verbally to the dean or designee.)

Additional information: Have you discussed your situation with the course instructor?

When? _____

Have you attended class regularly? _____ Have you taken all regularly scheduled exams? _____

Have you discussed your situation with your academic advisor? _____ What are your exam/project grades? _____

What is your advisor's name? _____

The above statements are true and accurate to the best of my knowledge.

Signed: _____
Student's signature Date

IV. FOR INSTRUCTOR'S USE

Has the student discussed his/her performance in the course with you, with a view toward completion of the course? _____

Has the student's attendance record been satisfactory? _____

At this point, what is the student's grade in the course? _____

ADDITIONAL COMMENTS: _____

Signed: _____
Instructor's signature Date

V. FOR DEAN'S USE

If drop is approved, complete below.

Approved _____ Disapproved _____ Grade Assigned W WF (Circle One)

Signature _____ Date: _____

