

PETITION TO WITHDRAW FROM A COURSE

after the Drop/Add Period
(through 10th week of instruction)

Student's Name: _____ ID#: _____

Address: _____ Phone #: _____

E-Mail: _____

Term: _____ Dept: _____ Course #: _____ Sect: _____ Instructor's Name: _____

I understand that I will remain financially responsible for this course enrollment, that the course will remain on my academic record, but that the "W" grade will not be calculated into my grade point average.

Student's Signature _____ ***Date*** _____

TO BE COMPLETED BY INSTRUCTOR AND ADVISOR:

I verify that the last day of attendance by this student in the course indicated above was:
(Indicate month, day, year) _____

Instructor's Signature _____ ***Date*** _____

I have spoken to the student on the effects of this withdrawal on his/her completion of graduation requirements.

Advisor's Signature _____ ***Date*** _____