



Late Request For Withdrawal from Class(es)

Late withdrawals must be requested no later than one year from the last day of the term in question. Written documentation supporting your claim of mitigating circumstances must accompany this form. Submit your form and documentation directly to the Coordinator of the Student Success Center.

Section A – To be completed by the Student (Please print clearly.)

Term For Which You Are Requesting a Late Withdrawal:

FALL SEMESTER (Aug-Dec) 20____ SPRING SEMESTER (Jan-May) 20 ____ SUMMER SESSION (May-July) 20 ____

Student's SSN: _____

EmplID: _____

 Last Name First Name MI Jr.,3rd

 Street Address City State Zip

Daytime Phone#: _____

Evening Phone#: _____

Please complete Columns A,B,C,D,E, F and G below:

A Class ID Nbr	B Subject	C Class Number	D Section Number	E Campus	F Class Title	G Last Date You At- tended Class
25741	IST	100	01A	Parham	Introduction to Example Class	Sept. 10, 2002

I have attached documentation to support a claim of mitigating circumstances: Yes No

SIGNATURE OF STUDENT: _____ DATE: _____

Section B: For Office Use Only:

Coordinator: _____ Date Received: _____ Last Day of Term: _____

Documentation Attached? Yes No Satisfactory Progress in course(s) Verified? Yes No

FA Will be Terminated? Yes No Recommendation: Approved Disapproved

Comments: _____

Signature: _____ Date: _____

Associate VP of Academic Affairs: Date Received: _____ Decision: Approved Disapproved

Comments/Instructions: _____

Signature: _____ Date: _____

Please forward approvals to Central A&R; disapprovals to coordinator.

A&R: Approval recorded by: _____ Date: _____ Verified by: _____ Date: _____