

DROP FORM

OFFICE USE ONLY

PLEASE PRINT ALL INFORMATION

NAME _____ DATE _____
LAST FIRST

STUDENT ID NUMBER (SSN) _____ QUARTER _____ 20 _____

COURSE ID TO BE DROPPED _____ INSTRUCTOR APPROVAL _____
Example MATH 081.01

NAME OF INSTRUCTOR _____ STUDENT SIGNATURE _____

DROP REASON (See reverse for codes) _____ STUDENT'S PHONE NUMBER _____

Instructor approval always required for the following courses regardless of date when class is dropped: Arts 3B, 3BL, 58A, B, C; All Chemistry courses (signature must be obtained during laboratory times); Film/TV 20, 22, 50, 52A, B, 53, 54, 54X, Y & Z, 55A, 56, 57, 58R thru Z, 62, 63A, 64, 66, 74 W, X, Y & Z, 80, 80X, Y; Music 8A & B, 20, 21, 23, 25G thru N, 27A, 27B, 32, 34, 42, 45C, 46, 48; Photography-all except 20, 21 & 63; Thea 86A, 86B, 20 A, B, & C. Failure to obtain approval may result in course failure and a hold placed on your record.

DROP REASONS

Please put code for the reason for dropping in the space provided on the other side.

- | | |
|---|---|
| A - Work conflict | I - Not making satisfactory progress |
| B - Transportation | J - Too heavy course load |
| C - Health | K - Moving from area |
| D - Course content not appropriate for my goals | L - Financial problems |
| F - My skills not adequate for course at this time | M - Not Motivated |
| G - Personal conflict with instructor | N - Other. Please state: _____ |
| H - Dislike teaching style of instructor | _____ |