REQUEST FOR LATE DROP

DEADLINES FOR 2015-2016

<table>
<thead>
<tr>
<th>TERM</th>
<th>FALL TERM 2015: DEC. 14</th>
<th>SPRING TERM 2016: JUNE 20</th>
<th>SPRING/SUMMER 2016: AUG. 16</th>
</tr>
</thead>
<tbody>
<tr>
<td>WINTER TERM 16</td>
<td>APRIL 18</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

TERM ________________________

■ DO NOT fill out this form if you are a GRADUATE STUDENT, in RC or Honors, or enrolled in another College, even if the class you want to drop is in Kinesiology. Please contact the advising center of your program.

■ DO NOT fill out this form to drop the only class you are registered for. Please ask the Office of Undergraduate Student Affairs about a TERM WITHDRAWAL.

■ DO NOT fill out this form if you want to drop a mini course.

Printed Name  ______________________________________________________  ID#  _________________________

Uniqname (e-mail)  __________________________________________________  Phone  _______________________

Course you wish to drop

__________________________/__________________________________________/________________/_______________

Class # (e.g. 12345)    Subject (e.g. English)           Catalog # (e.g. 125)       Section # (e.g. 003)

Before you drop this course, please answer the following questions

1. Is this your first term in the School of Kinesiology? □ Yes □ No

2. Are you an international student? □ Yes □ No
   
   If yes, you must also contact the International Center regarding the impact on your visa status.

3. Are you a student-athlete? □ Yes □ No
   
   If yes, you must also contact the Athletic Department regarding the impact on eligibility.

4. Are you on probation? □ Yes □ No

5. Are you dropping below 12 credits? (Below 6 credits in a half term?) □ Yes □ No

6. Are you on financial aid or do you have a scholarship that requires full-time status? □ Yes □ No
   
   If yes, you should contact the Financial Aid Office and/or the scholarship provider.

7. Have you dropped a course after the first drop deadline in previous terms? □ Yes □ No

8. Is this course a requirement for your major or pre-professional program? □ Yes □ No
   
   If yes for your major, you may also want to speak with a major advisor.

9. Are you dropping a mini-course? □ Yes □ No

10. Do you have an outstanding judicial case pending for this course? □ Yes □ No

11. Is your reason for dropping grade or gpa related? □ Yes □ No

➔ If you answered YES to any question or have concerns about dropping, see an academic advisor before approval

NOTE: When you late drop a course, it appears on your transcript with a W” (for “withdrawal”) in the grade column. The “W” has no effect on your GPA. Your tuition charges are also not affected by a late drop.

~ Return completed form to the Office of Undergraduate Student Affairs, 555 S. Forest ~

(continued)
Reason you are dropping this course:

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

TO THE INSTRUCTOR:

In order to help students make an informed decision, please discuss with the student their current standing and progress in the course.

I have discussed the student’s progress in the course with the student.

Student’s Last Date of Participation ______________

Instructor’s Name ________________________________

Signature ______________________________________

Date _______________ Email ________________________

FOR THE ADVISOR:

I have discussed dropping this course with the student.

Signature ______________________________________

Date _______________

Student’s Fill Out Election Worksheet Below

I understand the effect that dropping this course may have on my program of studies.

Student’s Signature ________________________________

Date ________________

What will be your schedule after dropping this course?

Course (e.g. English 125) Credits

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

Total Credit Hours: _______

Student’s Fill Out Election Worksheet Below

I understand the effect that dropping this course may have on my program of studies.

Student’s Signature ________________________________

Date ________________

Election Worksheet - Student’s Please Fill Out Completely

<table>
<thead>
<tr>
<th>LAST NAME</th>
<th>FIRST</th>
<th>MIDDLE</th>
<th>UM ID NUMBER</th>
<th>YEAR AND YEAR</th>
</tr>
</thead>
<tbody>
<tr>
<td>SCHOOL OR COLLEGE</td>
<td>FIELD OF STUDY (PLAN)</td>
<td>UNDERGRADUATE</td>
<td>GRADUATE/PROFESSIONAL</td>
<td></td>
</tr>
<tr>
<td>CLASS #</td>
<td>SUBJECT ABBR</td>
<td>COURSE #</td>
<td>CREDIT HRS</td>
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IF YOU ARE CHANGING ONLY CREDIT HOURS OR MODIFIERS (P/E, VISIT ENTER CHANGE BELOW). 

LAST DATE OF PARTICIPATION: 

LAST DATE OF PARTICIPATION: 

APPROVED BY / DATE

PHOTO IDENTIFICATION REQUIRED FOR PROCESSING

LAST DATE OF PARTICIPATION TO BE COMPLETED BY INSTRUCTOR