

ACADEMIC REGULATIONS COMMITTEE  
**INSTRUCTOR'S STATEMENT**  
(LATE DROP/RETROACTIVE DROP OR TOTAL WITHDRAWAL)

Instructor's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Department: \_\_\_\_\_

The student identified below has submitted an **Academic Regulations Committee (ARC)** petition requesting permission to late or retroactively drop your class after the established deadline. Your cooperation in providing the following information is vital in assuring that the committee's decision serves the needs of both the university and the student. Please answer these questions to the best of your knowledge and return this form to the student.

***It is the student's responsibility to submit the INSTRUCTOR'S STATEMENT with the ARC petition, a personal statement and other pertinent information to the ARC representative of the student's major:***

Arts & Sciences: Ms. Kim Williams, BEH 201  
Business Administration: Ms. Jackie Nelson, BSN 1406  
Education: Dr. Paulette Walker, EDU 106  
Engineering: Ms. Kate Johnson, ENC 1302  
Visual & Performing Arts: Ms. Carol Kerrigan, FAH 120

Nursing: Ms. Michelle Jenkins, MDC 22  
Center for Academic Advising (Undeclared & Undergraduate  
Non-Degree): Ms. Julie Carr, SVC 2011  
Honors: Ms. Celeste Lazzara, FAO 274  
Undergraduate Studies: Mr. Jerry Collins, SVC 2002

Student's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Student ID Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Course Ref. # \_\_\_\_\_ Course Prefix: \_\_\_\_\_ Course # \_\_\_\_\_ Course Section # \_\_\_\_\_

Course Title: \_\_\_\_\_

Term Offered:  Fall  Spring  Summer "A"  Summer "B"  Summer "C" Year Offered: \_\_\_\_\_

**ATTENDANCE/PERFORMANCE – ARC requires this section to be completed by the Instructor only.**

1. On what date did this student stop attending class? \_\_\_\_\_ Never Attended:   
Comments: \_\_\_\_\_ Not Known:   
Irregular Attendance:   
Currently Attending:

2. What grade was the student earning at the drop deadline? \_\_\_\_\_  
Comments: \_\_\_\_\_ A B C D F S U  
(Circle One)

3. What grade was the student earning at the time he/she stopped attending class? \_\_\_\_\_  
Comments: \_\_\_\_\_ A B C D F S U  
(Circle One)

4. Was the student provided any evaluation prior to the drop deadline? If no, explain. \_\_\_\_\_ Yes:   
Comments: \_\_\_\_\_ No:

5. What is your reaction to this student being permitted to drop/withdraw late from your course?  
Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ Support:   
No Objection:   
Oppose:

Instructor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Campus Extension: \_\_\_\_\_ E-mail Address: \_\_\_\_\_