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: o Fall  o Spring  o Summer “A”  o Summer “B”  o 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? ________________________________
   Comments: __________________________________________________________________________

2. What grade was the student earning at the drop deadline? _____________________________
   Comments: ____________________________________________________________________________

3. What grade was the student earning at the time he/she stopped attending class?________
   Comments: ____________________________________________________________________________

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

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

Instructor Signature: __________________________________________ Date: ____________________
Campus Extension: _____________  E-mail Address: ________________________________________