

REQUEST TO WITHDRAW (DROP) FROM A COURSE AFTER THE DEADLINE

Please print clearly

Full Name: _____ Sooner ID#: _____
 Address: _____ Major: _____
 City/State/Zip: _____ Classification: _____
 Phone #: _____ Expected Date of Graduation: _____
 E-mail: _____

University policy prohibits dropping courses after the 12th week of the spring or fall semester. Exceptions are granted only in extenuating circumstances such as serious or prolonged illness and you must provide documentation to substantiate your request. Reasons that are NOT acceptable include: You thought you had dropped the course on-line (please provide copy of email confirmation to drop); you wish to reduce your academic load; you are not performing as you would like; your work schedule has changed; you changed your major/minor and no longer need the course to fulfill requirements; you did not know there was a published deadline; you forgot to withdraw before the published deadline.

If you believe your case is exceptional, fill out this form as directed. **You will need the signature(s) of your instructor(s) to drop this course after the published deadline. They will also assign a grade of W or F. If your instructor(s) assigns a W, you may continue with the petitioning process. ASSIGNMENT OF A "W" BY INSTRUCTOR(S) DOES NOT GUARANTEE APPROVAL BY THE COLLEGE.**

Fill out the top portion of this form and the student section below. On a separate page, submit an explanatory page to explain and justify your request. Specifically, why do you think this request should be granted; what prevented you from accomplishing this before the deadline; what circumstances led to this request? Be concise and clear. You must also provide supporting documentation. Have your Instructor(s) fill out the instructor section below.

STUDENT TO COMPLETE THIS SECTION:

Please allow me to **WITHDRAW** from the following course(s) for the (circle one) **spring, summer, fall semester** for (year:) _____
 1. Course _____ Section: _____ # Hrs. _____ 2. Course: _____ Section: _____ # Hrs. _____
 Student's Signature: _____ Date: _____
TOTAL HOURS ENROLLED WITH THIS CHANGE: Before: _____ After: _____

TO BE COMPLETED BY INSTRUCTOR(S):

This student is requesting to **WITHDRAW** from the above-named course after the published drop date. The student's request will not be approved without your verification, but your willingness to allow the requested action does not necessarily mean we will grant the request. The College will make that decision on the merits of the student's circumstances. Please sign below and assign a grade of **W** or **F**.

1. Instructor Signature: _____ Date: _____ Grade: (circle one) **W** or **F**
 Print Name: _____ Course #: _____
 2. Instructor Signature: _____ Date: _____ Grade: (circle one) **W** or **F**
 Print Name: _____ Course #: _____

Submit this form, with Instructor(s) signature(s), (or copy of email) and grade, your explanatory page, and any supporting documentation, to the Dodge Family College of Arts and Sciences' Student Success and Advising Center (Physical Sciences Center, room 240), or email to casforms@ou.edu. All documents must be submitted at the same time, or your petition may not be accepted for consideration.

FOR OFFICE USE ONLY (Do not write in this section)

rev 12/2/2021 - jkt

Action by the College: _____ Approved _____ Denied _____
 Signature: _____ Date: _____
 Comments: _____