



**RECOMMENDATION FOR  
ADMINISTRATIVE WITHDRAWAL FROM A COURSE**  
(RO-01/25)

FROM:

Instructor's Name \_\_\_\_\_

Semester/Year \_\_\_\_\_

I am requesting the following student(s) be withdrawn from the course(s) indicated below for reasons of excessive absences or non-participation. If processed prior to the deadline to withdraw from the course with a "W", the student will be withdrawn from the course and receive a final grade of "W". If processed after the deadline, the student will not be withdrawn and will receive a final grade of "FIW". The failing grade will be calculated into the student's GPA.

CRN	SUBJ-CRS	Student ID#	Student Name	Last date of attendance & number of absences

Contacted student \_\_\_\_\_ date(s) must be noted       Contacted PSC \_\_\_\_\_ date(s) must be noted

Additional Information: \_\_\_\_\_

CRN	SUBJ-CRS	Student ID#	Student Name	Last date of attendance & number of absences

Contacted student \_\_\_\_\_ dates(s) must be noted       Contacted PSC \_\_\_\_\_ dates(s) must be noted

Additional Information: \_\_\_\_\_

CRN	SUBJ-CRS	Student ID#	Student Name	Last date of attendance & number of absences

Contacted student \_\_\_\_\_ dates(s) must be noted       Contacted PSC \_\_\_\_\_ dates(s) must be noted

Additional Information: \_\_\_\_\_

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

*Please submit to the Registrar's Office for initial review. The Registrar's Office will forward to the Provost for signature.*

Provost: \_\_\_\_\_ Date: \_\_\_\_\_