THE UNIVERSITY OF MICHIGAN
SCHOOL OF NATURAL RESOURCES
& ENVIRONMENT

UNDERGRADUATE LATE DROP REQUEST FORM

(This form is for SNRE students only.)

APPROVAL by both the COURSE INSTRUCTOR and the OAP ADVISOR are REQUIRED for dropping a course after the third week of a full semester (and after the second week of the Spring Half or Summer Half term).

STUDENT Information

Name _____ UM ID# ___ ___ ___ ___ - ___ ___ ___ ___

Field of Study _____ Expected Graduation Date _____

Subject, catalog number, and section(s) number (ex. NRE 100 sec. 001) _____

Class number _____ Course Title _____

Reasons for requesting late drop _____

_____

_____

_____

_____

Student's Signature Date

INSTRUCTOR

Student performance to date Passing ___ Failing _____ Unable to judge _____

Comments _____

_____

_____

_____

I approve _____ disapprove _____ this request for a late drop.

_____

Instructor's Signature Date

ADVISOR

Evaluation of the effect of this late drop on this student's program _____

_____

_____

_____

I approve _____ disapprove _____ this request for a late drop.

_____

Advisor's Signature Date