The sample drop request form below is a guide to assist you in filling out your form correctly. The success of your drop transactions depends on your completing the form correctly.

Fill in name, student identification number, (CIN) quarter, year, and date submitted.

You must indicate course abbreviation and number, section number, and unit value for each course so your drop request form can be processed.

Refer to instructions below for appropriate approvals.

CALIFORNIA STATE UNIVERSITY, LOS ANGELES
OFFICE OF THE REGISTRAR

DROP Request Form

PRINT NAME __________________________________________________________________ QUARTER ____________________ YEAR ___________

(CIN) ___________ – ___________ – ___________ – ___________ DATE SUBMITTED ________/________/________

CAMPUS IDENTIFICATION NUMBER: ____________________

State serious and compelling reasons as to why you must drop this course(s):

__________________________

Student’s Signature ____________________ Date ____________________

DROPS

“W” DROP PERIOD

EMERGENCY “W” PERIOD

SUBJECT CATALOG CLASS SECTION UNITS INSTRUCTOR DEPT/DIVISION COLLEGE

TECH 297 14862 03

To take a class with CR/NC or A,B,C/NC grading option or to audit a class, go to Admin. 146 for processing.

See instructions above and on the next page for required signatures.

DROP REQUEST FORM — INSTRUCTIONS

1. STATE REASON FOR DROP REQUEST:
   Policy requires that all drops after the 7th day of instruction be for serious and compelling reasons ONLY.

2. DROPS:
   – NO-RECORD DROP USE GET OR STAR – Drops completed by the seventh day of instruction for the term DO NOT require department/division/instructor approval.
   – “W” DROP PERIOD – Drops may be considered only for serious and compelling reasons and require the signatures of instructor and appropriate department/division chair. Documentation to support serious and compelling reasons may be required.
   – EMERGENCY WITHDRAWAL PERIOD – Drops may be considered only for reasons deemed to be serious and compelling and require the signatures of instructor, department/division chair and college dean. Drops requested during this period usually involve total withdrawal from all classes.

3. After Emergency Withdrawal period, an appeal and official documentation to support request is required.

4. SUBMIT COMPLETED FORMS—to the Office of Enrollment Services, Admin. 146, with your Golden Eagle Card.

For assistance in completing this form, call or visit the Office of Enrollment Services, Admin. 146, (323) 343-3840.

† Saturdays are included as “days of instruction;” Sundays and holidays are not.

SAMPLE

State serious and compelling reasons as to why you must drop this course(s):

D R O P S

“W” DROP PERIOD

Student’s Signature Date

S A M P L E

See instructions above and on the next page for required signatures.

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