



Instructor's Name: \_\_\_\_\_ Date: \_\_\_\_\_

The student identified below submitted a petition to the St. Petersburg Academic Regulations Committee (ARC); the student is requesting permission to late or retroactively drop your class. By answering the following questions to the best of your knowledge, you will help to ensure that the ARC's decision serves the needs of both the student and the University. After you have answered these questions, please return this form to the student.

The student is responsible for submitting this instructor's statement, a completed ARC petition, a personal statement, and any supporting documentation to the ARC representative associated with the student's college:

Table with 6 columns: College, Representative, Room, College, Representative, Room. Rows include Arts & Sciences, Business, Education, and Lower Level.

Student's Name: \_\_\_\_\_ Phone Number: (\_\_\_\_\_) \_\_\_\_\_

USF ID Number: U \_\_\_\_\_ USF E-Mail Address: \_\_\_\_\_@\_\_\_\_\_

Course Ref. Number (CRN): \_\_\_\_\_ Course Prefix: \_\_\_\_\_ Course #: \_\_\_\_\_ Course Section #: \_\_\_\_\_

Course Title: \_\_\_\_\_

Term Offered: ( ) Fall ( ) Spring ( ) Summer A ( ) Summer B ( ) Summer C Year Offered: \_\_\_\_\_

ATTENDANCE/PERFORMANCE (To be completed by the Instructor only)

- 1. On what date did this student stop attending your class? ( ) Never attended ( ) Not Known ( ) Irregular Attendance ( ) Currently Attending
2. What grade was the student earning at the drop deadline? A B C D F S U (Circle one of the above)
3. What grade was the student earning at the time s/he stopped attending your class? A B C D F S U (Circle one of the above)
4. Was this student provided any evaluation prior to the drop deadline? ( ) Yes ( ) No
5. What is your recommendation concerning the student being permitted to drop/withdrawal from your course after the drop deadline? ( ) Support ( ) No Objection ( ) Oppose

Comments: \_\_\_\_\_

Instructors Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Instructor's Campus Extension: \_\_\_\_\_ Instructor's E-Mail Address \_\_\_\_\_@\_\_\_\_\_

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