



Graduate Delete Course Form
USF St. Petersburg Graduate Studies
140 Seventh Avenue South, BAY 204
St. Petersburg, Florida 33701-5016
Telephone: (727) 873-4567 Fax: (727) 873-4889
www.stpt.usf.edu/spgrad

INSTRUCTIONS FOR COMPLETION & SUBMISSION

*Please read all instructions prior to form submission. Complete all sections.
Incomplete forms will be returned to the student unprocessed and will delay action on your request.*

DELETE PROCESS:

- The Delete Course form is used to delete a course from the student's record. (The form can be used to delete up to two courses, registered in, **in the same semester**. Please use additional forms as necessary).
- This form should be used by Graduate students. Non-Degree seeking students enrolled in graduate level course work should also use this form.
- The Delete Course form can be used **only** for the following circumstance.
 - **University Error**
- The **student** completes sections I and II, signs and dates the form and attaches a letter of explanation.
- The **student** then submits the original form with the letter of explanation to the Instructor, Department/Program Chairperson or Director and College Dean to complete section III.
- The **College** then submits the form and all supporting documentation to the Associate Vice Chancellor for Research and Graduate Studies to complete section IV. (Graduate School approval is required).
- Once the process is completed, the Registrar's Office will send a copy of the form to the student by mail.
- This process can take several weeks; the student is encouraged to use OASIS to check the status of the request.

REQUIRED SUPPORTING DOCUMENTATION:

- **Written explanation from the appropriate university personnel on letterhead indicating the university error: (An email communication between the student and appropriate university personnel verifying/acknowledging the university error may be attached to the petition request in lieu of the letter on university letterhead).**

REQUIRED SIGNATURES:

- Delete requests with missing signatures will be returned to the student **unprocessed/with no action taken**.
- Obtain signatures in the order listed on the form.

FINANCIAL RESPONSIBILITY:

- Financial liability should be confirmed with the cashier's office after the student receives their copy of the processed form from the Office of the Registrar.

DIRECTIONS FOR INTERNATIONAL STUDENTS:

INTERNATIONAL STUDENTS: Please check **YES** or **NO** in the International Student box on the front of the petition to verify your International student status. Students with an F-1 Visa must meet with an ISSS advisor prior to submitting this form for signatures. If the advisor does not approve the delete request, **DO NOT PROCEED WITH THIS PETITION REQUEST**. Petition requests for International students will not be processed without prior ISSS approval. Make an appointment with an ISSS Advisor by calling (813) 974-5102. ISSS is located on the USF Tampa campus in CPR 469. Information about immigration status requirements is available at: http://web.usf.edu/iac/iss/student_F-1.html.

ISSS ADVISOR: The ISSS Advisor should check the **YES box and provide initials** indicating approval of the request within the International Student box that is on the front of the form. A written approval letter on letterhead from ISSS may be attached to the petition if special circumstances are to be considered.



GRADUATE DELETE COURSE FORM

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International Student Yes No

F1 students, please see instruction page.

ISSS Advisor Approval Yes Initials

NOTE: Do not complete this form if your request is not based on university error. If you never attended the course you should complete a Graduate Petition to ADD/DROP/CHANGE HOURS and submit a Fee Adjustment Form if your circumstances meet the criteria outlined on the Fee Adjustment Form. That form can be found at http://www.stpt.usf.edu/spgrad/Faculty_&_Staff/documents/MicrosoftWord-gradpetition080808.pdf.

PART I. STUDENT INFORMATION

NAME: _____ U-ID#: U _____
Last First M.

STREET: _____ EMAIL: _____

CITY/STATE/ZIP: _____ PHONE: _____

COLLEGE & DEPT: _____

STUDENT CLASSIFICATION? Graduate Doctoral Candidate Certificate Program Non Degree Seeking

PART II. COURSE INFORMATION

SEMESTER & YEAR ACTION IS REQUESTED FOR? Fall Spring Summer Year: _____

COURSES TO BE DELETED? Fill in all course information below.

Delete Reference No. _____ Prefix _____ Number _____ Section _____ Hours _____

Delete Reference No. _____ Prefix _____ Number _____ Section _____ Hours _____

X STUDENT SIGNATURE: _____ **DATE:** _____

PART III. COMMENTS AND RECOMMENDATIONS

Approve Disapprove _____ Date: _____ E-Mail or Ph:# _____
Instructor's Signature

COMMENTS: _____

Approve Disapprove _____ Date: _____ E-Mail or Ph:# _____
Instructor's Signature

COMMENTS: _____

Approve Disapprove _____ Date: _____ E-Mail or Ph:# _____
Dept/Program Chairman/Director Signature

COMMENTS: _____

Approve Disapprove _____ Date: _____ E-Mail or Ph:# _____
College Dean/Graduate Coordinator's Signature

COMMENTS: _____

PART IV. THE DECISION OF THE GRADUATE DEAN

Approve Disapprove _____ Date: _____ E-Mail or Ph:# _____
USF St.Petersburg Graduate Studies

COMMENTS: _____

OFFICE USE ONLY Registrar (original) College Graduate School Student