



FACULTY DROP CARD

Term: _____ Year: _____ Section No: _____ Course Name & No. _____

STUDENT I.D. #	STUDENT'S NAME	EFFECTIVE DROP DATE

Note: The effective drop date should be entered in your roll book for the student listed above. This card should be turned in immediately to Admissions & Records upon determining that the student is no longer actively enrolled.

Instructor's Name: _____

Dean's Signature: _____

Instructor's Signature: _____

OFFICE USE ONLY:

Processed Not Processed _____ Staff _____ Date _____

Reason

11/2018: A&R: aa



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