



--	--	--	--	--	--	--	--

Reason for Dropping: \_\_\_\_\_

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Department Head

\_\_\_\_\_  
Dean

\_\_\_\_\_  
University Registrar

**Registrar's Copy**

*NOTE: This Dropping Form should be submitted to the Registrar's Office on or before the last day of the official dropping period. Failure to do so invalidates the dropping.*

