

CALIFORNIA STATE UNIVERSITY, SACRAMENTO SPRING 2020 SEMESTER - DROP PETITION March 9th - May 8th

INSTRUCTIONS

Use this form to withdraw from **one/few** course(s) for the semester

It is the student's responsibility to notify their instructor(s) that they have dropped the course and are no longer participating in the class.

DROP POLICY:

Although instructors may exercise their authority to administratively remove any student who fails to attend during the first two weeks of instruction, students should not assume they will be dropped. Students will receive a final grade of "F" or "WU" in courses they fail to drop officially.

 Students wishing to withdraw from all courses, should fill out the Semester Withdrawal Form (www.csus.edu/ssc > Under Forms > Records & Registration).

WITHDRAWAL POLICY:

Drops after the fourth week of the semester (census date) are called withdrawals. A grade of "W" is recorded on the student's transcript. The "W" grade for courses dropped March 9 through May 8, 2020 will not be included in the maximum 18 units of "W" grades allowed within your undergraduate academic career. It is not possible to withdraw after the last day of instruction, Friday, May 8, 2020.

SUBMISSION: Return the completed form via email as an attachment to registrar@csus.edu –must be sent from your My Sac State email account. To submit the document in-person, use the drop-off box located to the left-hand side of Lassen Hall 1000.

FINANCIAL AID: If you are receiving financial aid, it is important contact the Student Service Center and discuss your file with a counselor and the impacts of your withdrawal. Visit the Student Service Center online at http://www.csus.edu/ssc for drop-in counseling hours.

QUESTIONS: Contact the University Registrar at registrar@csus.edu

SPRING 2020 – DROPPING COURSE(S)			
NAME:	SAC STATE ID #:		
PHONE #:	EMAIL ADDRESS:		

CLASS NUMBER (ex: 35609)	COURSE NAME (ex: SOC 130)	CLASS SECTION (ex: 1)	UNITS (ex: 3)

I request to drop from the courses listed above and acknowledge the conditions to my record:

YOUR SIGNATURE	DATE
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*Documents sent from SacLink account will be accepted in place of signature.

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SUBMISSION

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THIS SECTION IS FOR STAFF USE ONLY					
CLASS DROPPED:	STAFF INITIALS:		DATE		
IF NOT DROPPED, REASON:					
DATE FORM RECEIVED:		DATE FORM	INPUTED:		