FACULTY DROP

DEPT	COURSE #	SECT#	COURSE TITLE	CREDIT	INSTRUCTOR	TERM/YR	
					_		
ID.			ME		CLASS YEA		
			class meetings of a waitlist		d has not contac	ted me. I here	
arop tni	s student fro	om my cia	ss and will accept a waitlist	ea student.			
Faculty S	ignature		Date				
This rea	meet must h	e received	in the Registrar's Office by	the fifth da	y of classes		
Tills Tcg	lucst must o	c received	in the Registral's Office by	the min da	y of classes.		
Сору: І	Faculty Men	nber					
			EACH TV DE	OD.			
DEPT	COURSE #	SECT#	FACULTY DE	CREDIT	INSTRUCTOR	TERM/YR	
<u> </u>	COCKSE	SECT #	COURSE TITLE	CKEDII	HISTROCTOR	TEXIVI/TX	
ID #		NA	NAME			CLASS YEAR	
			class meetings of a waitlist	ed course an			
			ss and will accept a waitlist				
		<i>J</i> • • • • • • • • • • • • • • • • • • •					
Faculty S	ignature		Date				
This rec	uest must b	e received	in the Registrar's Office by	the fifth da	y of classes.		
,	L		,		•		
Сору: І	Faculty Men	nber					
			FACULTY DR	OP.			
DEPT	COURSE #	SECT#	COURSE TITLE	CREDIT	INSTRUCTOR	TERM/YR	
ID	#	NA	ME		CLASS YEA	 R	
nas not	attended the	first two	class meetings of a waitlist	ed course an	d has not contac	ted me. I here	
drop thi	s student fro	om my cla	ss and will accept a waitlist	ed student.			
Faculty S	ionatura		Date			<u> </u>	
racuity 5	ignature		Date				
This req	uest must b	e received	in the Registrar's Office by	the fifth da	y of classes.		
- 7			<i>5</i>		•		
Copy: I	Faculty Men	nber					