



FLORIDA STATE UNIVERSITY

COLLEGE OF EDUCATION

Office of Academic Services and Intern Support

GRADUATE STUDENT LATE DROP PETITION

Name _____ FSU Email _____

Cell Phone _____ Date _____ EMPLID _____

Course Requesting To Be Dropped

Course Prefix & Number	Section	# of Credits	Instructor

Guidelines

1. Meet with your professor(s) to discuss possible options before beginning the drop petition process.
2. Attach a typed explanation which details your need to drop the above course. Fully explain your reasons for petitioning to drop the course after the drop/add deadline and why you cannot complete the course.
3. Students are financially liable for any courses that are on their schedule after the drop/add period ends.
4. If the course drop is due to medical reasons, you must complete and submit a Medical Course Drop application through University Health Services (contact OASIS for more information).

Instructor's Statement

Note: Student is required to obtain this information prior to submitting completed form to OASIS.

Student's Attendance: good fair poor

Student's Current Grade _____

Instructor's Name _____

Instructor's Signature _____ Email _____

Instructor's Comments:

I understand that any drop(s) approved may affect insurance coverage (health and auto), housing, graduation, financial aid, and repeat course surcharge. I attest that no Academic Honor Policy charges are pending for the course(s) listed below. I understand that I must continue attending the course I am petitioning to drop until I am informed of the Academic Dean's decision.

Student Signature _____

Return to OASIS Graduate Director, 2301 Stone

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