

TENNESSEE TECHNOLOGICAL UNIVERSITY
REQUEST TO DROP A CLASS
AFTER THE DEADLINE

**YOU MUST ATTACH ANY SUPPORTING DOCUMENTATION FOR
EXTENUATING CIRCUMSTANCES**

General Information

Name (Print or Type) _____ Student ID (T#) _____

Mailing address _____

Student email _____ Phone _____

Signature _____ Date _____

Course(s) for which you are seeking an exception to drop after the published deadline

CRN Subject Course #

CRN Subject Course#

CRN Subject Course #

CRN Subject Course#

Explain in detail why you did not meet the requirement to drop before the published deadline

**IF YOU ARE APPROVED TO DROP AFTER THE DEADLINE, THE INSTRUCTOR
WILL ASSIGN A 'W' GRADE. A 'W' DOES NOT AFFECT YOUR GPA.**

Recommendation of Advisor:

Approve _____ Deny _____ No recommendation _____

Comments _____

Advisor's Signature _____ Date _____

Recommendation of Instructor:

Approve _____ Deny _____ No recommendation _____

Comments _____

Instructor's Signature _____ Date _____

Recommendation of Records and Registration:

Approve _____ Deny _____

Comments _____

Records' Signature _____ Date _____

Name _____
Last _____
First _____
MI _____
T# _____
Date Processed _____
Processed By _____