COLLEGE OF EDUCATION, HEALTH, AND HUMAN SCIENCES OFFICE OF ACADEMIC SERVICES AND INTERN SUPPORT (OASIS) GRADUATE STUDENT LATE COURSE DROP PETITION

Name STUDENT FSU Email			mail
EMPLID	ACADEMIC PLAN/MAJOR		
Course Requesting to Be Dropped			
Course Prefix & Number	Section	# of Credits	Instructor
Guidelines 1. Meet with your professor/s to o	discuss nossible (ontions hefore he	eginning the drop petition process
 Attach a typed explanation whi petitioning to drop the course a Students are financially liable for the course drop is due to med application through University Submit a separate form for each 	ch details your no and why you cant or any courses th dical reasons, you Health Services (n course drop rec	eed to drop the a not complete the at are on their sc must complete a contact OASIS fo quested.	bove course. Fully explain your reasons for course. Thedule after the FOURTH day of classes. and submit a Medical Course Drop r more information).
6. Submission of the form is not a	guarantee of pos	t-seventh week o	course drop approval.
Instructor's Statement Note: Student is required to obtain this	s information pri	or to submitting o	completed form to OASIS.
Student's Attendance: good	fair	poor	
Student's Current Grade	_		
Instructor's Name			
Instructor's Signature		Ema	ail
Instructor's Comments:			
Honor Policy charges are pending fo the course I am petitioning to drop u	nip eligibility, an r the course list until I am inform	nd repeat course ted above. I undo ned of the Acade	e surcharge. I attest that no Academic erstand that I must continue attending
Student Signature			

Form fields must be typed. Authenticated digital signatures are required.