DROP/WITHDRAWAL/SCHEDULE REVISION POLICY

College of Agriculture and Life Sciences
Office of Academic Programs
115 Paterson Hall

I. REGULAR ADD/DROP PROCEDURES

A. During the regular add/drop period, use the procedures outlined in TRACS Schedule of Courses.
*B. Regular Add Deadline: End of first two weeks of a semester or first four days of a summer session.
*C. Regular Drop Deadline for 100-400 level courses: End of first six weeks of a semester or first eleven days of a summer session.
*D. Regular Drop Deadline for 500-600 level: Up to one week after midsemester or first half of the total class days in a summer session.
E. During weeks three and six weeks of a semester, full-time undergraduate students who wish to drop below the 12-hour minimum course load, or change to audit or credit only grading must secure approval from the dean of their college. Students should be aware that dropping below 12 hours may affect financial aid or eligibility for on-campus housing.

*Deadlines are described generally. Consult the University Academic Calendar for actual dates within any given semester.

II. LATE DROP/SCHEDULE REVISION PROCEDURE

Late drops/schedule revisions are limited to the reasons listed below, and requests for such changes will not be accepted in the CALS Office of Academic Programs after the last day of classes. A request for a late drop or late change in grading status must be accompanied by the following documentation:

1. Medical reasons; with supporting statements of recommendation from a physician, clinic, hospital, etc. A note from a parent or relative is not sufficient.
2. Emotional problem or crisis situation; with statements of recommendation from counselors at the NCSU Counseling Center (2000 Harris Hall) or from a private psychiatrist or psychologist.
3. Personal or family hardship supported with documentation that the hardship occurred after the normal drop deadline.

PROCEDURES:

A. Obtain a Schedule Revision form and a Request for Late Drop/Withdrawal/Schedule Revision form from your faculty adviser or the CALS Office of Academic Programs (115 Patterson).
B. Write a statement on the Request for Late Drop/Withdrawal/Schedule Revision form detailing the reasons for your request.

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C. Meet with instructor to discuss your request. Ask instructor to complete Section 2 on back of the Request for Late Drop/Withdrawal/Schedule Revision form, documenting your academic progress in the course.

D. Meet with faculty adviser to discuss conditions for the late schedule revision request. Ask adviser to complete Section 3 on back of the Request for Late Drop/Withdrawal/Schedule Revision form.

E. If your request is due to medical reasons, obtain a note from your physician.

F. If your request is due to an emotional problem or crisis situation, obtain written documentation from a counselor at the NCSU Counseling Center or from a private psychiatrist or psychologist.

G. If your request is due to financial hardship and you are employed, obtain a note from your employer indicating where you work, when you began your employment and the number of hours you work each week.

H. Take your Schedule Revision form, the Request for Late Drop/Withdrawal/ Schedule Revision form (with both sides completed), and other documentation materials to the CALS Office of Academic Programs (115 Patterson). Leave all the items with the Secretary.

I. Request will be reviewed. Return to the CALS Office of Academic Programs (or telephone 515-2614) within two days to learn whether your request was approved.

J. If approved, the student must submit the Schedule Revision form to Registration and Records, 1000 Harris Hall.

III. WITHDRAWAL FROM THE UNIVERSITY

A. All withdrawals from the University are initiated through the NCSU Counseling Center in 2000 Harris Hall.

B. Call the Counseling Center at 515-2423 and make an appointment to see a counselor.

C. Withdrawals may be approved by Counseling Center for these reasons:
   1. Medical reasons
   2. Emotional problem or crisis situation
   3. Statement of documented hardship, approved by the Academic Dean in the College of Agriculture and Life Sciences

D. Procedures:
   1. If a withdrawal request is determined to be hardship, the counselor will ask you to obtain the signature of your Academic Dean.
   2. Call 515-3248 or 515-2614 to make an appointment with one of the Assistant Directors of Academic Programs.
   3. Bring withdrawal form, along with a letter of explanation and documentation of-extenuating hardship, to the Assistant Director's office.
   4. Request will be reviewed. If approved, the student will return the form to the Counseling Center, where instructions will be given regarding completion of the withdrawal process.

IV. READMISSION

To apply for readmission to the University, contact Readmissions Office, 1000 Harris Hall (515-2572).

Deadlines for late drops and adds are listed on the Academic Calendar.
COURSE STATUS REPORT/ADVISER'S RECOMMENDATION

SECTION 1: To Be Completed by the Student

Student's Name___________________________
SSN________________________

Course No._________________ Section No._____
Instructor________________________

Authorization to Release Information:

By signing below, I give the Instructor of the above course permission to release information on my performance to the College of Agriculture and Life Sciences relative to my request for a late drop, withdrawal, or schedule revision.

Student's Signature___________________________
Date____________________________

SECTION 2: Status in Course (To Be Completed by the Instructor)

To the Instructor:

The above student seeks a late drop or a late change in grading status in your course. Please provide information on the student's current status in the course.

Overall Grade: Passing________ Not Passing________

Current Letter or Numerical Grade (if available) ________

Attendance: Good________ Satisfactory________ Poor________

Instructor's Comments (Optional). Attach a page if needed.

Are additional comments attached? Yes________ No________

Instructor's Signature___________________________
Date____________________________

SECTION 3: Academic Adviser's Recommendation

To the Adviser:

Please indicate your recommendation concerning the student's request for a late drop, withdrawal, or schedule revision.

___________ I support the request.
___________ I do not support the request.

Adviser's Comments (Optional) Attach a page if needed.

Are additional comments attached? Yes________ No________

Adviser's Signature___________________________
Date____________________________
REQUEST FOR LATE DROP/WITHDRAWAL/SCHEDULE REVISION

Student's Instructions:

In the space below, write a statement detailing the reasons for your request (attach additional pages if needed). Complete Section 1 on the back of this page, and ask the instructor and your academic adviser to complete Sections 2 and 3, respectively.

Student's Name:
(printed)________________________________________________________

Local Address:
________________________________________________________________

Zip Code:________________

Local Telephone: (919)-________________________________________

Course Number and Section:________________________________________

Student's Signature_______________________________________________

Date___________________________________________________________