



Northern Michigan University
Registrar's Office
C.B. Hedgcock, Room 2202
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Marquette, Michigan 49855
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Administrative Withdrawal Request

Policy Statement:

At the discretion of individual departments and/or instructors, students who have not attended through the first four days of the semester (or its equivalent) of a class and who have failed to contact the instructor may be dropped from the class roster. Since this is an optional action on the part of the departments, students who wish to drop a class should do so themselves.

Date: _____

Student Name: _____

IN#: _____

Course ID: _____

Course Registration Number (CRN): _____

_____ I verify that this student has not attended the course listed above and request that, in accordance with University Policy, the student be administratively withdrawn from the course.

_____ I have notified this student, as required, that they are being dropped from my course.

Instructor Name: _____

Instructor Signature: _____

FORM MUST BE RECEIVED IN THE REGISTRAR'S OFFICE BY 5 P.M. THE TUESDAY OF THE SECOND WEEK OF THE SEMESTER. Forms received after this date/time will not be processed.

Please send form as an e-mail attachment to schedule@nmu.edu.