DROP FORM (Summer Only)
TSGB Cruise; Commercial Cruise; Co-Op; Int'l Experience

Name: _____________________________________________________ Student ID: _______________________________

Class/Major: _______________________________

DID STUDENT ATTEND ANY PORTION OF THE COURSE?  __________

DATE OF OFFICIAL DROP: ______________________________

REASON FOR DROP: ______________________________________________________________________________________
________________________________________________________________________________________________________
________________________________________________________________________________________________________

☐ COURSE/SECT # ________________ CLASS # _______ TITLE ________________________________

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Signatures below required after summer term begins

_____ APPROVED  _____ DISAPPROVED

Course Department Chair’s Signature & Date ________________________________

_____ APPROVED (for W grade) _____ DISAPPROVED (for WU grade)

Academic Dean's Signature & Date ________________________________________

Student Signature/Date __________________________________________________

Campus Email Address __________________________________________________

For Office Use Only:  Email:  Student Financials; Cashier; and TSGB Coordinator or Commercial Cruise/Co-Op/Int'l Exp. Coordinator If student is receiving VA benefits, update VA Once.

Revised 03/2016