Instructor’s Note

Today’s Date________________

Instructor_______________________________________

Course Title____________________________________

Section and Registration Code_____________________

Term__________________________________________

Re:

Student’s Last Name_____________________________ First Name______________________

EMPLID (CUNY ID)_____________________________ E-mail Address:__________________

Dear Professor,

The above student is petitioning for a retroactive withdrawal from your course. In order to help us evaluate the student’s petition, please answer the following questions. Thank you in advance for your participation in this matter.

What was the student’s last date of attendance? ______________________________________

_____________________________________________________________________________

Was the student passing the course before he/she stopped attending? _____________________

_____________________________________________________________________________

How many absences did the student have prior to his/her last date of attendance? ___________

_____________________________________________________________________________

How many absences did the student have prior to his/her last date of attendance? ___________

Do you support the student’s petition for a retroactive withdrawal? _____________________

_____________________________________________________________________________

Please provide any further comments that you think are relevant.

Instructor’s Signature_______________________________ Date of Signature_______________

Note: If the instructor cannot be reached, the respective chair or deputy chair, may complete this form to the best of his/her knowledge.

**This note should be upload online only to the E-petition site and not by e-mail, interoffice, or mail. Thank you.**