UNIVERSITY OF WISCONSIN-MILWAUKEE
Helen Bader School of Social Welfare

UNDERGRADUATE APPEAL FOR LATE DROP

PLEASE READ THE LATE DROP PROCEDURE BEFORE SUBMITTING THIS APPEAL.

Complete the form below. Return the completed form and any documentation to the School Receptionist on the 11th floor of Enderis Hall. **STUDENTS ARE CAUTIONED TO REMAIN IN COURSES UNTIL A FINAL DECISION IS REACHED.**

Name _______________________________________________  ID# ____________________________________
Local Address___________________________________________________________________________________
(Street)     (City)   (State)      (Zip)
Phone ___________________________     E-Mail ________________________
Course(s) you wish to drop:

Reason for drop (attach additional sheets of paper if necessary):

I understand that I am responsible for the authenticity of signatures on this form and any supporting documentation. Any misrepresentation will result in disciplinary action against the student on whose behalf this form is submitted.

Student Signature ______________________________ Date _____________________

For Office Use Only

Date Received __________________

☐ Approved
☐ Denied

Office Signature         Date