



Charles R. Drew University of Medicine and Science • Office of Registration & Records
1731 East 120th Street, Los Angeles, CA 90059 Phone: (323) 563-4838 Fax: (323) 563-4837

Administrative Drop/Dismissal Form

Refer to the University Catalog for information on policies regarding Administrative Drops, Withdrawals and Dismissals. Submit this form to the Office of Registration and Records.

Student ID #: _____ Student Full Name: _____
Program: _____ Faculty Full Name: _____

Course Drop - Attendance (to be completed by CDU Faculty)

Student is being dropped from: _____ (course)

Term and Year: Spring Summer Fall 20____

Last Date of Attendance: _____

Instructor Signature: _____ Date: _____

University Administrative Withdrawal/Dismissal

____ Continuing student is **being administratively** withdrawn from the University for the following reason:

____ Absenteeism ____ Other

-or-

____ New student in their first semester of the program is being **administratively withdrawn** after registering and not attending for the following reason:

____ Deferring start of program ____ Financial Barriers ____ Personal/Family Issues ____ Other

Brief Explanation:

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-or-

____ Student is being **dismissed** from the University for the following reason:

____ Conduct ____ Academic Performance ____ Other

Required Signatures

Faculty: _____ Date: _____

Program Director/Chair/Dir. of Student Affairs _____ Date: _____

Registrar: _____ Date: _____

↓ Office of Registration and Records - Office Use Only ↓		
Registrar Signature: _____	Date: _____	
Final Grade(s)	DOD:	LDA:
Date Processed in NSLDS	Screenshot	
Academic Standing:	Term GPA:	Cum GPA: