



Office of Academic Standing
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AcademicStanding@brooklyn.cuny.edu

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.**