ADVISOR’S FORM

TO: CCAS SCHOLASTIC STANDING COMMITTEE – RUTGERS, CAMDEN CAMPUS

PART I. TO BE COMPLETED BY THE STUDENT

DATE: __________

STUDENT’S NAME: ____________________________ RU ID #: ______________

SCHOOL #: ___ 50 – College of Arts & Sciences or ___ 64 – University College

NAME OF COURSE SCHOOL # SUBJECT # COURSE # SECTION #

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NAME OF ADVISOR: ____________________________ SEMESTER: _______

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PART II. TO BE COMPLETED BY THE ADVISOR AND RETURNED WITHIN FIVE (5)
DAYS TO THE SCHOLASTIC STANDING COMMITTEE, ACADEMIC ADVISING
OFFICE, 311 COOPER ST.

The above student is petitioning the Scholastic Standing Committee to retroactively withdraw from
the above course. Your comments will aid the Committee in making a decision.

1. In your opinion, why do you believe the student wishes to withdraw from this course?

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2. In many cases, a student’s reason for withdrawing from a course is personal. If you have discussed
personal problems, a brief comment could be helpful to the Committee.

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3. Any additional information that you believe would assist the Committee in making a decision will
be appreciated. Please use the reverse side if necessary.

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ADVISOR’S SIGNATURE: ____________________________ DATE: ____________