Administrative Withdrawal Due to Class Disruption

Student Name: _____ **BearPass Number:** _____

Instructor Name: _____ **Semester:** _____

Course Subject/Number/Section: _____ **Course Title:** _____

Is this course required in the student's degree plan? ☐ **YES** ☐ **NO**

If *yes*, are other options for taking the course available? ☐ **YES** ☐ **NO**

Describe the disruptive behaviors that the student displayed in class, your attempts to resolve the problems, and the student's response to each. Please focus on the actual behaviors used by the student (e.g., asking excessive questions, making threatening comments, talking during lecture, leaving and returning to the classroom repeatedly during lectures). The cell sizes will adapt to accommodate the amount of information you provide. Rows can be added or deleted from the table. A copy of this completed form should be kept in the department office and sent to the Associate Provost for Faculty and Academic Affairs.

Date	Disruptive Behavior	Faculty Member's Attempts to Resolve	Student's Response

Administrative Withdrawal (choose one):

☐ Based on the incident(s) of disruptive behavior listed above, I request the student to be administratively withdrawn from the class.

☐ Based on the incident(s) of disruptive behavior listed above, I request the student to be removed from the section indicated above and added to the following section:

Course Subject/Number/Section: *(Required)* _____ CRN: *(Required)* _____

☐ I am using this form only to report the disruptive behavior but do not yet request the student to be administratively withdrawn from the class.

Refund Percentage to be Granted (choose one):

☐ Use standard percentage applicable at time of drop ☐ 100% refund ☐ 75% refund ☐ 50% refund ☐ 25% refund ☐ No refund

_____ _____

Faculty Member Signature **Date**

_____ _____

Department Head Approval **Date**

Date Associate Provost for Faculty and Academic Affairs Notified: _____