

**SUPPLEMENTAL DATA FORM for
SCHEDULE REVISION REQUESTS
NORTH CAROLINA STATE UNIVERSITY**

SIDE 1: INSTRUCTIONS:

- 1. This form is to be used by students seeking to drop courses, or change courses to credit/audit after the deadlines have passed.**
- 2. Complete all applicable sections of the Schedule Revision Form and all applicable sections on this Supplemental Data Form, and submit these forms and all other appropriate documents to the Associate/Assistant Dean of Academic Affairs of your home college.**

At North Carolina State University, a deadline is imposed on student schedule modifications at 8 weeks for fall/spring semesters and 2 weeks for summer sessions. After this deadline, schedule modifications, except a change in section, require the approval of the student's associate/assistant dean (and the associate dean of the Graduate School for graduate students). Note that changes of sections only require the approval of the department offering the course. Requests to drop (or changes to CR or AU) specific courses after this deadline are considered only for unforeseen and unavoidable extenuating personal situations. In general, these unforeseen and unavoidable extenuating personal situations fall into one of three categories: 1. *Medical*, 2. *Psychological*, or 3. *Dire Personal or Family Hardship*. Reasons that are not valid for dropping (or changing to CR or AU) courses after the deadline include, but are not limited to, the following:

- I am doing poorly in the course.
- The instructor told me to drop the course.
- I am working too much.
- I do not like the way the course is being taught. I am having a personality conflict with the instructor.
- I have discovered the course is not needed for my degree, or for the degree I plan to pursue.
- I am transferring to another university.
- I want to protect my GPA (for jobs, scholarships, etc.).
- Any other reason that is not medical, psychological or dire personal or family hardship. Again, in all three categories the emphasis is on unforeseen and unavoidable extenuating personal situations.

Usually, if your reason is one of the above (or similar), then your request for a schedule modification will not be approved. However, if you believe that you do have a valid reason and would like to request a course drop (or change to CR or AU) after the deadline you should use the steps below. For all other requests, follow steps 3-6 below. **Note that all requests must have Sections 1-4 of the form on the back of this sheet filled out unless indicated otherwise. Note as well that all documentation must be turned in to the Associate/Assistant Dean of your college at least two weeks before the last day of classes of the semester.** To complete all necessary steps to have your request considered please follow the steps described below:

1. Write a memo to the *Associate/Assistant Dean, College of {Your College goes here}*, describing the situation, all events and dates and the effects that this situation has had on your life in general and your academic performance in particular. Also indicate how this situation is being proactively dealt with currently and how you plan to deal with it in the future.
2. If your situation is:
 - a. *Medical*: attach all appropriate documentation to your memo, including items from attending doctors, clinics, hospitals, etc. supporting your request. If your medical information is of a personal or confidential nature you may choose to schedule an appointment with Student Health Services, 1st floor of the Student Health Center.
 - b. *Psychological*: you should visit the University Counseling Center, 2nd floor Student Health Center to schedule an appointment for an evaluation of your situation. The counselors will conduct an evaluation and present documentation to you that should be included with your memo and forms to the Associate/Assistant Dean.
 - c. *Dire Personal or Family Hardship*: attach all appropriate documentation that supports the situation described in your memo.
3. Fill out SECTION 1 of the form on the back of this sheet.
4. Present the form to the instructor of your course. The instructor provides information in SECTION 2.
5. Undergraduate students should then have SECTION 3 completed by your departmental Academic Advisor or by your Director of Undergraduate Programs/Coordinator of Advising. **(Note that some colleges have specific requirements concerning whether the academic advisor or the undergraduate director/coordinator of advising must complete SECTION 3 – thus undergraduate students are encouraged to contact their home college before SECTION 3 is completed.)** Graduate students should have SECTION 3 completed by your Academic Advisor.
6. Graduate students should present the form to the Director of Graduate Programs. He/she will fill out SECTION 4.
7. **Bring your memo, forms, and documentation to your College Associate/Assistant Dean's Office. The dean will communicate with you regarding their decision and the necessary actions required.**

SECTION 1: To be completed by the Student

Semester: _____ Year: _____

Student Name: _____ Student ID: _____

Course: _____ Section: _____ Instructor Name: _____

Requested Action (drop, add, change to credit only [for undergraduates only], etc.): _____

Authorization: By signing below I give the Instructor of the above course permission to release information regarding my academic performance and academic integrity as it relates to my participation in this course to relevant NC State administrators.

Student Signature: _____ Date: _____

SECTION 2: To be completed by the Course Instructor

The above named student is seeking a schedule modification. If the student has signed the Authorization in SECTION 1 above please complete section 2(a):

2(a) As of _____ (insert date)

Attendance in Course: Good _____ Satisfactory _____ Poor _____

Overall Grade in the Course Passing: _____ Not Passing: _____

Letter (or number) grade if available: _____

2(b) If you wish to provide a recommendation or include additional comments, please do so below or attach your comments to the back of the form.

2(c) I have additional information regarding this request and wish to have the College Assoc./Asst. Dean contact me before a decision is made: _____ Contact information: _____

2(d) Are you currently bringing an Academic Integrity Violation against this student? Yes _____ No _____

Printed Name: _____ Signature: _____ Date: _____

SECTION 3: UNDERGRADUATE STUDENTS should have Section 3 completed by your Academic Advisor or Director of Undergraduate Programs/Coordinator of Advising. GRADUATE STUDENTS should have Section 3 completed by your Academic Advisor.

I have additional information regarding this request and wish to have the College Assoc./Asst. Dean contact me before a decision is made: Yes _____ No _____ (If yes, provide contact information: _____)

Additional comments: _____ Are comments attached? Yes _____ No _____

Printed Name: _____ Signature: _____ Date: _____

SECTION 4: GRADUATE STUDENTS should have Section 4 completed by the Student's Director of Graduate Programs. Section 4 is NOT required for UNDERGRADUATE STUDENTS.

Do you support this request: Yes _____ No _____ No recommendation _____

I have additional information regarding this request and wish to have the Assoc./Asst. Dean contact me before a decision is made: Yes _____ No _____ (If yes, provide contact information: _____)

Are there additional advisor's comments attached to this form? Yes _____ No _____

Printed Name: _____ Signature: _____ Date: _____