



Northern Michigan University
Registrar's Office
C.B. Hedgcock, Room 2202
1401 Presque Isle Avenue
Marquette, Michigan 49855
Phone: 906-227-2278
Fax: 906-227-2231
www.nmu.edu

MEMORANDUM

Date: _____

To: Student Name: _____

IN#: _____

From: _____
Department Head

Re: Withdrawal for Non-Attendance

Page 25 of the 2006-07 Undergraduate Bulletin:

"At the discretion of individual departments and/or instructors, students who have not attended through the first four days of the semester (or its equivalent) of a class and who have failed to contact the instructor may be dropped from the class roster. **Since this is an optional action on the part of the departments, students who wish to drop a class should do so themselves.**"

According to the instructor you have not attended _____ Section # _____ and he/she has indicated that you should be dropped. I have, therefore, asked the Registrar to have you dropped from the class.

If you have any questions regarding this matter, please contact me.

cc: Registration and Scheduling
Student

THIS FORM MUST BE RECEIVED IN THE REGISTRATION OFFICE BY THE TUESDAY OF THE SECOND WEEK OF THE SEMESTER.

YOU MAY FAX THE FORM TO 227-2231