## **CALIFORNIA INSTITUTE OF TECHNOLOGY**

M/C 230-87, Room 230 Center for Student Services, <a href="mailto:gradofc@caltech.edu">gradofc@caltech.edu</a>

## **Late Drop Petition**

UID							
Last Name Option Current Degree		Year Entered Caltech					
				Email			
				final petition for approval	to the Office of the Dea I only be considered up	n of Gradua until Add Da	ommendations prior to submitting the te Studies. Late drops (requests to drop a ay of the following term and must include
Term (Please select one):	Fall	Winter	Spring				
Academic Year							
Course # Units		Instructor Signature					
Course #	Units		Instructor Signature				
Course #	Units	Instructor Signature					
Total Units after Drop		-					
	Date		Student Signature				
<ul><li>□ Recommended</li><li>□ Not Recommended</li></ul>							
	Date		Option Representative Signature				
After obtaining the signatu	res above, submit to Gr	adofc@Calte	ech.edu for approval by the Graduate Dean				
☐ Approved							
☐ Not Approved			Doop of Craduata Studies Signature				
	Date		Dean of Graduate Studies Signature				