

# Q-Drop Request Form



This form can be filled out with Adobe Acrobat and then printed for signatures.  
 Any questions may be directed to the Records Section 979-845-1003 or [records@tamu.edu](mailto:records@tamu.edu).

<b>LAST NAME</b>	<b>FIRST NAME</b>	<b>Student ID</b>
<b>Local Street Address</b>	<b>Local City, State, Zip</b>	<b>Contact Phone Number</b>

<b>Major Field of Study</b>	<b>Classification</b>	<b>Are you a degree candidate this term?</b>
		<input type="checkbox"/> Yes <input type="checkbox"/> No

CHECK THE SEMESTER FOR WHICH Q-DROP IS APPLICABLE: (current term only)

Fall   
  Spring   
  Summer I   
  Summer II   
  Summer 10-week   
 YEAR: .....

<b>COURSE(S) FOR WHICH Q-DROP IS REQUESTED:</b>		
<b>COURSE PREFIX (Ex: ACCT)</b>	<b>COURSE NUMBER (Ex: 229)</b>	<b>COURSE SECTION (Ex: 501)</b>

**Please select the SINGLE most important reason for requesting Q-Drop.**

<input type="checkbox"/> A. Conflict – employment/child care <input type="checkbox"/> B. Employed too many hours <input type="checkbox"/> C. Excessive course load <input type="checkbox"/> D. Medical <input type="checkbox"/> E. Financial <input type="checkbox"/> F. Death in the Family <input type="checkbox"/> G. Dropping out of Corps <input type="checkbox"/> H. Changing major <input type="checkbox"/> I. Dropping to add another course	<input type="checkbox"/> J. Not required for graduation <input type="checkbox"/> K. Do not have prerequisites <input type="checkbox"/> L. Cannot pass qualifying exam <input type="checkbox"/> M. Course too difficult <input type="checkbox"/> N. Not doing well in class <input type="checkbox"/> O. Missed too many classes <input type="checkbox"/> P. Difficulty with professor <input type="checkbox"/> Q. Professor hard to understand <input type="checkbox"/> R. Personal Other
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<b>To be completed by Student</b>	<b>To be completed by Academic Department Or Dean's Office</b>
By signing this form I certify my understanding that hours for Q-dropped courses <b>WILL NOT BE USED TO DETERMINE ENROLLMENT STATUS</b> and I may no longer be considered full-time if my enrolled hours drop below the minimum required based on career level (undergraduate or graduate) and the term in which the drop occurs. I understand dropping below full-time status may adversely impact financial aid, eligibility for tuition rebate, eligibility as a dependent for insurance coverage, veteran's benefits, athletic eligibility, scholastic probation, eligibility for extracurricular activities and some types of employment, etc. <b>INTERNATIONAL STUDENTS MUST RECEIVE PRIOR APPROVAL FROM INTERNATIONAL STUDENT SERVICES BEFORE DROPPING BELOW FULL-TIME.</b>	Number of semester hours <b>BEFORE</b> drop: .....  Number of semester hours <b>AFTER</b> drop: .....
_____ Student Signature	_____ Authorizing Signature of Dean and/or Department
_____ Date	_____ Date