## ENGINEERING STUDENT REQUEST TO START CLASSES AFTER 2<sup>ND</sup> WEEK OF SEMESTER

Student Name	ID#	Semester
Course		
Instructor please complete the following feel would be helpful:	information an	d provide any additional comments you
<ul> <li>How many classes missed</li> <li>Assignments/points missed</li> <li>Exams or quizzes missed</li> <li>How will missed points be handled</li> <li>Likelihood for student success at the Additional comments:</li> </ul>	d	e semester
Instructor signature		Date
Instructor please complete the following feel would be helpful:  How many classes missed Assignments/points missed Exams or quizzes missed How will missed points be handled Likelihood for student success at the Additional comments:	d :his point of the	e semester
Instructor signature		Date
Course Instructor please complete the following feel would be helpful:  How many classes missed Assignments/points missed Exams or quizzes missed How will missed points be handled Likelihood for student success at the Additional comments:	d	
Instructor signature		Date

Or if preferred, instructor may send information directly to: ISU Engineering Academic Standards Committee, probationengr@iastate.edu, Phone: 515-294-8355.