

Instructor's Documentation Form

Undergraduate Academic Regulations Committee (ARC)



UNIVERSITY of
SOUTH FLORIDA

Student Success
Office of the Registrar

I. STUDENT INFORMATION

Last Name _____ First Name _____ USF ID _____

II. COURSE INFORMATION AND INSTRUCTIONS TO BE COMPLETED BY STUDENT

Which Semester? Course Term: Year _____ Semester: Fall Spring Summer A Summer B Summer C

Which Class? Check if you're a non-degree student

CRN	PREFIX	NUMBER	SECTION	CREDIT HOURS	TITLE	ONLINE ONLY?	DAY(S) OF WEEK	MEETING TIME START TO END
						Y / N	M Tu W Th F	/

Have your instructor complete **Part 3** below.

Complete the ARC Petition Form by following all instructions, and attach a **Personal Statement** and one **Instructor's Documentation Form** per class. Include supporting documentation.

III. TO BE COMPLETED BY INSTRUCTOR

The student identified above has submitted an Academic Regulations Committee (ARC) petition requesting permission to enroll in or withdraw from your class after the established deadline. Your cooperation in providing the following information will assist the committee in making its decision. Please answer the following questions to the best of your knowledge and return this form to the student. If you have questions or concerns regarding this petition, please contact the ARC representative of the college of the student's major, as listed below. Thank you for your assistance in this matter.

PLEASE CHECK A BOX BELOW

Answer all of the corresponding questions

Late Withdrawal

- When did the student stop attending class, or for online courses, when was the last day of participation? (mm/dd/year or Never Attended) _____
- On which date was the last recorded grade made available to the student? (mm/dd/year) _____
- Was the student provided any grades prior to the tenth week of classes? (please circle) YES NO
- What was the student's grade at the tenth week of classes? (A/B/C/D/F/S/U) _____

Late Add

- Has the student attended your class this term?
 YES NO
- Will the student be able to makeup missed work?
 YES NO
- Does the student have permission to add your course?
 YES NO

UNDERGRADUATE ARC REPRESENTATIVES

College/Office	Campus	Building/Room	Name	Email	Phone	Mailing Address
The Arts	Tampa	FAH 120 St. Pete DAV 134	Reginald Joseph Amanda Timmers	rejoseph@usf.edu atimmers@usf.edu	813-974-4349 727-873-4004	Tampa Campus 4202 E Fowler Ave, Tampa, FL 33620
Arts & Sciences	Tampa	BEH 201	N/A	casarc@usf.edu	813-974-6957	
Behavioral & Community Sciences	Tampa	MHC 1143	Jessica Harris Lisa Landis	Jlharris3@usf.edu llandis@usf.edu	813-974-8841 813-974-6217	St. Petersburg Campus 140 7th Ave S, St. Petersburg, FL 33701
Business	Tampa	BSN 2102	Jack Lynch	jlynch@usf.edu	813-974-4290	
Education	Tampa St. Pete Sarasota	EDU 106 HWH 201 SMC B210	Sydney Navarro Heather Duncan Vanessa Marasco	navarros@usf.edu hbduncan@usf.edu vmarasco@usf.edu	813-974-5183 727-873-4947 941-359-4288	Sarasota-Manatee Campus 8350 N Tamiami Trail, Sarasota, FL 34243
Engineering	Tampa	ENC 1302	Liliana Clark	eng-acad-stds@usf.edu	813-974-2684	
Nursing	Tampa	MDA 1002	Maikelyn Lopez	mlopez21@usf.edu	813-974-9086	
Public Health	Tampa	COPH 1039	Melissa Lee	COPH-UG@usf.edu	813-974-7080	
UGS/Undeclared/Non-degree Seeking	Tampa	SVC 2002	N/A	ugsarc@usf.edu	813-974-4051	

Instructor's Name (Printed) _____ Instructor's Email _____

Instructor's Signature _____ Date _____