

IVC

Office of Admissions and Records

5500 Irvine Center Irvine, California 92618 (949) 451-5220

Course Name (i.e. WR 1): Ticket Num		Ticket Number	per: Semester/Year:		
nstructor Name:			To be completed by t	To be completed by the Office of Admissions and Records staff.	
Student ID	Student Na	me (Last, First)	Student Successfully Dropped	Notes	
		-shows in accordance with class session during the tire	•	tions, Title V, Section 58004 and the	
Instructor Signature			Date		

Processed By:

Use this form to drop a student as a no-show from your class after the 65% point (the last day to drop with a "W") and prior to the last day of the course. Complete and sign this form and submit it to the Office of Admissions and Records prior

Date Processed: