



ECU

Office of the Registrar | 207 East 5th Street | Mail Stop 518 | Greenville, NC 27858-4353
Office: (252) 328-6747 | Fax: (252) 328-4232 | Email: regis@ecu.edu
www.ecu.edu/registrar

Verification of Non-Attendance

Date: _____

Name: _____ Banner ID: _____

The above student has never attended my class. I support his/her decision to be dropped from my class.

Course	Number	Section	Instructor Signature	Date
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

TO BE COMPLETED BY THE ECU FINANCIAL AID OFFICE

The applicant is requesting for the above courses to be dropped due to non-attendance. If approved, this will result in the following adjustment or repayment of funds:

Financial Aid Counselor

Date

Please return completed form to the Office of the Registrar