

Student Name: _____ **Student ID:** _____

Student Instructions: Please ensure you have listed each course on your schedule and obtained the instructor signature. Return this form along with your request to the Registrar’s Office who will then sign off on the original request for academic progress.

By signing below, I authorize UMSL (Instructors, Registrar’s Office, etc.) to release the information below.

Student Signature: _____ **Date:** _____

Instructors: The student above is seeking to confirm they are attending class and making satisfactory academic progress for the week of _____. Please sign and date under your course information. The Registrar’s Office will use your approval to sign off accordingly.

Course Subject	Course Catalog #	Instructor Name

I certify the above student has been attending/participating in class and is making satisfactory progress

Instructor Signature: _____ **Date:** _____

Course Subject	Course Catalog #	Instructor Name

I certify the above student has been attending/participating in class and is making satisfactory progress

Instructor Signature: _____ **Date:** _____

Course Subject	Course Catalog #	Instructor Name

I certify the above student has been attending/participating in class and is making satisfactory progress

Instructor Signature: _____ **Date:** _____

Course Subject	Course Catalog #	Instructor Name

I certify the above student has been attending/participating in class and is making satisfactory progress

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I certify the above student has been attending/participating in class and is making satisfactory progress

Instructor Signature: _____ **Date:** _____

Return Form to:
Office of the Registrar
269 MSC

For Questions:
Phone: 314-516-5545
Email: Registration@umsl.edu