INSTRUCTOR VERIFICATION OF ATTENDANCE

Student Name_____________________________________Date________________________

SCC ID #_______________________________________Semester _______________________

Dear Instructor:

The Financial Aid Office has been notified that the student listed above has withdrawn from or received a failing (F, NC, or W) grade in your course at Solano Community College. In order to comply with Federal Regulations, we need your assistance in determining the date this student last attended your class. Reference http://www.solano.edu/financial_aid/titleiv.php. Please complete the items below and return this form to the Financial Aid Office.

TO BE COMPLETED BY INSTRUCTOR ONLY

Course Name, Number, and CRN__________________________________________________

☐ The student completed this course and earned an “F” or “NC” grade.

☐ The student attended at least one (1) class meeting, but the date of withdrawal is unknown.

☐ The student stopped attending this course on (date)_____________________________

☐ The student never attended this course.

____________________________________________________________________________

Instructor Printed Name    Instructor Signature    Date

Thank you for your assistance in this matter.

Maureen Mason-Muyco, Financial Aid Lead Specialist
Solano Community College Financial Aid Office
4000 Suisun Valley Road, Room 425
Fairfield, CA 94534
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Return to Title IV (R2T4) Funds Policy - Instructor Verification of Attendance