INTENT TO DISASSOCIATE  
(Need 4 copies)

Date: ________________  
Math 150  
Section: ____________  

To: ____________________________  

From (Group Name): ____________________________  

Because of your failure to work successfully within this group as evidenced by

______________________________________________________________________________  
______________________________________________________________________________  
______________________________________________________________________________  
______________________________________________________________________________  
                                                                              
(fill in blank appropriate to the situation)  

notice is hereby given to you that __________________ (group name) is seriously considering  
your disassociation from this group.  

If this situation is not corrected within __________________ (a reasonable and specific time  
period), you will receive a follow-up letter from this group formally disassociating you.  

Sincerely,  

Group ____________________  

Group members’ signatures below:  

Course instructor’s signature: ____________________  

Course teaching assistant signature: ____________________  

(Course instructor and TA– Sign all 4 copies. Give 1 copy to the named student, 1 copy to the  
group, 1 copy for the TA, and 1 copy for the instructor.)
LETTER OF DISASSOCIATION
(Need 4 copies)

Date: ______________
Math 150
Section: __________

To: ______________________________

From (Group Name): ______________________________

Please consider this letter your official disassociation from _______________(group name), since there has been no concerted effort on your part to change the conditions this group outlined in the Intent to Disassociate letter sent to you on _______________(date).

Note to Group: If any further conditions have arisen, please note them in a separate paragraph here.

Sincerely,

Group __________________

Group members’ signatures below:

Course instructor’s signature: _______________________

Course teaching assistant signature: _______________________

(Course instructor and TA– Sign all 4 copies. Give 1 copy to the named student, 1 copy to the group, 1 copy for the TA, and 1 copy for the instructor.)