

Request to Drop/Add a Course

use this form for any change after your initial registration to add, drop, or switch sections

Please print clearly and fill out all information on the registration form

Name: _____
(first) (middle) (last)

Social Security #: _____ Birth Date: _____

Current Address: _____

City: _____ State: _____ Zip: _____

Personal Email: _____

Phone (with area code): _____ Type (Circle One): cell home work

Note: Dropping or adding courses will not be official until processed by the Records and Registration's Office. Dropping classes may affect your financial aid, loan eligibility, and/or car/health insurance discounts. Please be sure to talk to Financial Aid or Student Accounts. You are encouraged to talk to your advisor regarding changes in your schedule, however, final responsibility for fulfillment of requirements lies with you. By signing this form you indicate you understand this information.

School Year: _____

Fall Spring Summer

Program of Study: _____

Office Use Only

Drop	Add	Course Number								Sect	Online	Course Title	Days	Start Time	End Time	Credit Hours	% Refund Back	Instructor Notified

Student Signature: _____

Date: _____

Advisor Signature: _____

Date: _____

Records and Registration Office Use Only

Received: _____

Processed: _____

Student Info Verified: _____