

# GRADUATE ADD / DROP FORM

**Student Name:** \_\_\_\_\_

**Date of Request:** \_\_\_\_\_

**Semester:** \_\_\_\_\_ Fall \_\_\_\_\_ Spring \_\_\_\_\_ Summer **Year:** 20\_\_\_\_\_

*Important: Be sure to include ALL information. Consult course list and class schedule for course numbers, credit hours and day/time.*

## ADD

COURSE #	Section (ex. A)	CREDIT HOURS	COURSE TITLE	DAY-TIME

Reason for change: \_\_\_\_\_

## DROP

COURSE #	Section (ex. A)	CREDIT HOURS	COURSE TITLE	DAY-TIME

Reason for change: \_\_\_\_\_

**Student Signature:** \_\_\_\_\_

Dean's Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Registrar: \_\_\_\_\_ Date: \_\_\_\_\_

Financial Aid Office: \_\_\_\_\_ Date: \_\_\_\_\_

Business Office: \_\_\_\_\_ Date: \_\_\_\_\_

<b>Adjustment to account:</b>
Credit: _____
Charge: _____
_____

Copy to Director of Applied Studies