

Add/Drop Form

Updated 7.12.19

NOTE: Students must continue attending regularly scheduled classes until they receive a revised schedule.

Please return this form to Student Services for the Scheduling Committee to review.

Approval for course changes is not guaranteed.

Date:		Semester:			
 First Name:	Las	st Name:	Grade/Level:		
	p requests should be made du may result in a grade of "Withd (_	-		
	Course Title	Rea	ason/Comments		
	С	lasses to DROP			
	Course Title	Rea	ason/Comments		
Student Signature			Date		
Parent/Guardian Signature			Date		
Approved (Conditions):		Denied (Reason):			
Dean or Designee Signature:			Date:		