



GRADUATE STUDENT REGISTRATION ADD/DROP FORM

NAME (Please Print)	SEMESTER/YEAR/CAMPUS
SOCIAL SECURITY NUMBER	TELEPHONE (WORK) & (CELL) () - / () -
SIGNATURE	DATE

A \$10 Add/Drop Fee will be assessed for ALL changes in registration.

ADD COURSES:

Prior to refund period — signature of program director or academic advisor is required.
 After the refund period — signatures of program director or academic advisor and instructor are required.

CRN#	DEPT. CODE	COURSE NAME	CREDITS	DIRECTOR OR ADVISOR SIGNATURE	INSTRUCTOR SIGNATURE

DROP COURSES:

Prior to refund period — signature of program director or academic advisor is required.
 After the refund period — signatures of program director or academic advisor and instructor are required.

CRN#	DEPT. CODE	COURSE NAME	CREDITS	DIRECTOR OR ADVISOR SIGNATURE	INSTRUCTOR SIGNATURE

TOTAL HOURS BEFORE ADD/DROP: _____ TOTAL HOURS AFTER ADD/DROP: _____

I am completely withdrawing from the current semester, but plan to return.

I am completely withdrawing from the current semester and do not plan to return.

REASONS FOR WITHDRAWAL:

Medical (must be approved by Dean of Student Affairs)

Financial

Transferring to _____

Personal or Other _____

FOR OFFICE USE ONLY: Processed by _____ Date _____

Add/drop fee paid: Yes No Fee Waived Reason: _____ 103105-REG