



REGISTRATION ADD/DROP FORM

NAME (Please Print)	SEMESTER/YEAR
SOCIAL SECURITY NUMBER	TELEPHONE
SIGNATURE	DATE

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

ADD COURSES: Prior to refund period — signature of academic advisor is required.
 After the refund period — signatures of both academic advisor and instructor are required.

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

DROP COURSES: Prior to refund period — signature of academic advisor is required.
 After the refund period — signatures of both academic advisor and instructor are required.

CRN#	DEPT. CODE	COURSE NAME	CREDITS	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: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Fee Waived Reason: _____	103105-REG
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