

## GRADUATE REGISTRATION ADD/DROP FORM

|  |                      |
|--|----------------------|
| NAME (Please Print)  | SEMESTER/YEAR/CAMPUS |
| STUDENT ID/SSN   | TELEPHONE            |
| <p><b>ALL ATHLETES:</b> This add/drop must meet NCAA compliance regulations of maintaining full-time enrollment.<br/> <b>ALL STUDENTS:</b> Your enrollment at the University creates an implied contract for payment of tuition and fees. If you choose not to attend the University, you must officially withdraw from all courses within the first week of classes or you must pay all charges in full. I understand that should my student account become delinquent in excess of 150 days, Walsh University has the right to forward my account to a collection agency, and I will be responsible for all related collection costs of approximately 35%.</p> |                      |
| SIGNATURE  | DATE                 |

**A \$10 Add/Drop Fee will be assessed for ALL changes in registration processed after the last day to drop with a refund.**

**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. | CAT NO. | COURSE NAME | CREDITS | ADVISOR SIGNATURE | INSTRUCTOR SIGNATURE |
|------|-------|---------|-------------|---------|-------------------|----------------------|
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**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. | CAT NO. | COURSE NAME | CREDITS | ADVISOR SIGNATURE | INSTRUCTOR SIGNATURE |
|------|-------|---------|-------------|---------|-------------------|----------------------|
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**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 \_\_\_\_\_  
 Reason: \_\_\_\_\_  
 Personal or Other \_\_\_\_\_

**(Staff: If above student drop will result in LTFT as an athlete. DO NOT PROCESS!)**

**FOR OFFICE USE ONLY:** Processed by \_\_\_\_\_ Date \_\_\_\_\_

Add/drop fee paid:  Yes  No  Fee Waived Reason: \_\_\_\_\_