

COURSE ADD/DROP/WITHDRAWAL FORM

Student ID

A									
---	--	--	--	--	--	--	--	--	--

NAME _____				
Last	First	Middle		
Term	Major	Advisor	Local Phone Number	Cell Phone Number

COURSES TO BE WITHDRAWN/DROPPED*						COURSES TO BE ADDED					
CRN	SUBJECT ABBREV.	COURSE	SECT	COURSE TITLE	INSTRUCTOR SIGNATURE FOR WITHDRAWAL ONLY	CRN	SUBJECT ABBREV.	COURSE	SECT	COURSE TITLE	INSTRUCTOR SIGNATURE

*Course drop or withdrawal is determined by the date the student submits the completed form (with instructor and advisor signatures) to the Registrar's Office (Eldridge Hall, quad level).

Reasons: _____

Student Signature _____ Date _____ Advisor Signature _____ Date _____