

ADD/DROP FORM

Student Name (Print)

ID Number

Contact Phone Number _____ (check one): Cell Home Work

SEMESTER (check one): FALL SPRING SUMMER YEAR: 20_____

ADD COURSES

**Last Day to Add – 10 days after start of the semester. (Adding courses resulting in an overload will not be processed without dropping courses at the same time, or submission and approval of a Petition for Overload.)*

<u>COURSE ID</u>	<u>SECTION#</u>	<u>COURSE TITLE</u>	<u>DAY/TIME</u>
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Example: PSYC187 PZ 01

Internship in Psychology

MW 2:45

1	Course ID	Sec.		
	Instructor Signature (Required after classes begin)			
2	Course ID	Sec.		
	Instructor Signature (Required after classes begin)			
3	Course ID	Sec.		
	Instructor Signature (Required after classes begin)			

DROP COURSES

**Last Day to Drop without a recorded grade - 6 weeks after start of the semester.*

1	Course ID	Sec.		
	Instructor Signature (Required after the last day to add courses)			
2	Course ID	Sec.		
	Instructor Signature (Required after the last day to add classes)			
3	Course ID	Sec.		
	Instructor Signature (Required after the last day to add classes)			

X _____
STUDENT SIGNATURE Date

X _____
ADVISER SIGNATURE Date
(Required)

For Office Use Only
Date Processed: _____
Initials: _____