

## ADD/DROP/WITHDRAW COURSE FORM

Tech ID or StarID:	arID: Day Phone:				
Student Name:					
	Last Name	First Name		Middle Nan	ne
Fall Semester	Spring Semester	Summer Term	Year:		
Check if you are:	Post Secondary Enrollme	ent Options (PSEO) Le	vel III/#287 student		
Check if you are:	Receiving Financial Aid*	Agency Funded Pa	articipating in the Autor	mated Pa	yment Plan
		d, check with the Financial A ving courses will affect your fi			
		ption at the time they register.		dbook for	Grading Policy
ADD	o made addial o a grading o	paon at the time they register.			Crading Folloy
Course ID (Required)	Subject/#	Course Title	Start Date	Credit/	Alternate Grade Option
Instructor Signature re	equired for course add: _			Date:	
Course	egistration-course has alre prerequisite override	eady started			
DROP/WITHDRA\					
Course ID (Required)	Subject/#	Course Title	Start Date	LDA to W	Last Date to Withdraw
Student Signature:				Date:	
		For Office Has Only			
		For Office Use Only	,		
Processed by:		_ Date:	_ Withdrawal (W	/) F	Refund