



**Office of the Registrar
Add/Drop Request**

Please complete the requested information below if you would like to ADD or DROP a course. If you are dropping all of your courses you are enrolled in for the term, then you need to complete the Withdrawal Form located on the Office of the Registrar's website.

Please obtain the signatures required and return this form to the Office of the Registrar within two business days for processing. Please check your respective schools' academic calendar for official dates to add and drop courses.

Name: _____ Student ID number: _____

Date: _____ Semester: _____ 20 _____

School of Allied Health Professions School of Graduate Studies

Please list the courses that you wish to ADD

	Department	Course Number	Title	Credit Hours
ADD				
ADD				
ADD				

Please list the courses that you wish to DROP

	Department	Course Number	Title	Credit Hours
DROP				
DROP				
DROP				

Approval Signatures:

Student's Signature Date

Program Director/Dept Head Date

Student's Academic Advisor Date

Registrar Date

Dean/designated representative Date

FOR OFFICE USE ONLY

_____ Date processed in PeopleSoft
 _____ Copy sent to Financial Aid/Bursar's office
 _____ Filed in student file

_____ Date enrollment status updated to National Clearinghouse