



Day/Evening/Non-Credit Class Add/Drop/Withdrawal

Name: _____ Student-ID (Required): _____

Address: _____
Number and Street City /Town State Zip

Semester this request is for: (Check One)
FALL SPRING SUMMER First 6-Week SUMMER Second 6-Week
SUMMER 10 Weeks

Year: 20

Check all boxes that apply:

Are you on an International Student Visa? If checked, the International Student Advisor is REQUIRED to sign before processing.

Are you a Student Athlete? If checked, the Athletic Director or designee is REQUIRED to sign before processing Please complete the following: Mark the first box when adding a course; or the second box when dropping/withdrawing from a course. Fill out one row for each class.

Class One

Add Drop 4 digit class number Course number
Section number Number of Credits

Course Title

Days Times

Faculty Signature and Date Required for Class Over-Enrollment

Faculty Name

Date

Class Two

Add Drop 4 digit class number Course number

Section number Number of Credits

Course Title

Days Times

Faculty Signature and Date Required for Class Over-Enrollment

Faculty Name

Date

Class Three

Add Drop 4 digit class number Course number

Section number Number of Credits

Course Title

Days Times

Faculty Signature and Date Required for Class Over-Enrollment

Faculty Name

Date

Class Four

Add Drop 4 digit class number Course number

Section number Number of Credits

Course Title

Days Times

Faculty Signature and Date Required for Class Over-Enrollment

Faculty Name

Date

Class Five

Add Drop 4 digit class number Course number

Section number Number of Credits

Course Title

Days Times

Faculty Signature and Date Required for Class Over-Enrollment

Faculty Name

Date

Class Six

Add Drop 4 digit class number Course number

Section number Number of Credits

Course Title

Days Times

Faculty Signature and Date Required for Class Over-Enrollment

Faculty Name

Date

Class Seven

Add Drop 4 digit class number Course number

Section number Number of Credits

Course Title

Days Times

Faculty Signature and Date Required for Class Over-Enrollment

Faculty Name

Date

Refund Policy: The Date this form is received in the office will be the official date of withdrawal.

Day Course: Tuition only:

Before the first day of scheduled College classes 100%

During the first week of scheduled College classes100%

