Add/Drop Form

Student's Name ID Number

Permission to Add a Course

Course Number_____ Section_____ Credit Hours_____

Title of Course_____

INSTRUCTOR'S SIGNATURE   DATE

ACADEMIC ADVISORS SIGNATURE   DATE

Permission to Drop a Course

Course Number_____ Section_____ Credit Hours_____

Title of Course_____

INSTRUCTOR'S SIGNATURE   DATE

ACADEMIC ADVISORS SIGNATURE   DATE

Date completed form received in Registrar's Office