DROP ADD FORM

Student's Name _____   _____ **Student ID**

Course(s) to be Dropped:

Course ID	Course Title	Advisor's Signature	Date

Course(s) to be Added:

* Instructor's signature required if class is by permission only, if class is closed, or if class may be taken without prerequisites.

Course ID	Course Title	Advisor's Signature	* Instructor's Signature	Date

Date Filed with the Registrar's Office _____   Processed by _____

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