SCHEDULE CHANGE REQUEST

DATE _____

NAME _____

SS# _____ - _____ - _____ TERM _____

ADDING/DROPPING COURSES IS NOT OFFICIAL UNTIL SCHEDULE CHANGE CARD IS RETURNED TO AND PROCESSED BY THE RECORDS OFFICE. SEE REGISTRATION INFORMATION HANDOUT FOR PROPER PROCEDURES. RETAIN ENDORSED STUDENT COPY FOR VERIFICATION.

OFFICE USE ONLY

Date Received _____
Computer _____
Schedule Card _____
$5 Add/Drop Fee _____
Refund _____
Grade Sheet _____

	COURSE NUMBER	SECTION	COURSE TITLE	Last Date of Attendance	S.H.
DROP	:				
	:				
	:				
	:				
	:				

	COURSE NUMBER	SECTION	COURSE TITLE	S.H.
ADD	:			
	:			
	:			
	:			
	:			

REASONS FOR WITHDRAWAL

Attendance _____
Family/Health _____
Employment _____
Difficulty Level of Course _____
Schedule too Heavy _____
Other _____
Comments:

STUDENT _____ COUNSELOR/ADVISOR _____ RECORDS OFFICE _____