Registration - Add/Drop & Withdrawal Form

(Form May Be Copied), v1.1



Instructions:

- Step 1: Complete form in **ink** and **print clearly**
- Step 2: Obtain faculty or advisor signature to drop a course
- Step 3: If you receive financial aid, obtain financial aid signature for Withdrawals after Add/Drop Period
- Step 4: If you are dropping your last class, obtain Advisement Center signature (Room 160 Student Services Building)
- Step 5: Submit form to Registrar's Office -- (Class will be dropped on date Form is submitted to Registrar's Office)

STUDENT INFORMATION – All Fields Required for Processing								
Student ID:			Program of Study:					
Last Name:			First Name:		M	I:	Date of Birth:	
Address:								
City:			State:			ZIP Code:		
Telephone: (Home)			(Cell)	Email:			@student.seark.edu	
COURSE INFORM	IATION							
Please check the appropriate box: Year 20								
Term: \Box Fall -			ing - 16 weeks	□ Summer - I 1 st 4 weeks			☐ Intersession - 2 weeks	
			ing - 1st 8 weeks					
\Box Fall - 2 nd 8 weeks \Box Spring - 2 nd 8 weeks \Box Summer - E 8 weeks								
ADD Official Use Only								
Course Prefix & No.	Section	C	ourse Name		Class Meets C Day(s) Time(s) H		Override Signature	
				Day(s)	Time(s)	Hours	<u>"if"</u> Needed	
	<u> </u>		Added Credit	Hours:				
DROP								
Course Prefix & No.	Section		ourse Name		Class Meets Credit		Faculty or Advisor Signature	
				Day(s)	Time(s)	Hours		
Credit Hours Dropped:								
Total Credit Hours Remaining: *						12 Hours = Fulltime		
*TOTAL WITHDRAWAL - MUST SEE ADVISEMENT CENTER - Room 160								
Student Signature: Date Submitted to Registrar's Office:								
OFFICE USE ONLY								
Financial Aid Approved By:								
*Advisement Center Approved By:								
Registrar's Office Processed By: Date:								