Drop/Add Form

Student’s full name (Please PRINT):

First Name ___________________ Middle Name ___________________ Last Name ___________________

This is a petition to

_____ ADD

_____ DROP

Call Number ___________________ Course Department ___________________ 4-digit Course Number ____________

Section Number

Extenuating reason for drop or add:

__________________________________________________________________________________________________

__________________________________________________________________________________________________

__________________________________________________________________________________________________

__________________________________________________________________________________________________

__________________________________________________________________________________________________

Signatures must be obtained in the order listed:

Student

Instructor ___________________ Date

Department Chairperson ___________________ Date

Dean (or designee) 100 I.G. Greer Hall ___________________ Date

NOTE TO STUDENT: Please take this form to the Dean’s Office, 100 I.G. Greer Hall, within two days of obtaining the department chair’s signature.

The completed form must be taken to the Registrar’s Office, room 109 J.E. Thomas Hall.

Dean’s Office Use Only

_____ Drop is to be counted as one of the four allotted drops.

_____ Drop is NOT to be counted as one of the four allotted drops.