

Drop/Add Form

Information must be printed or typed in black or blue ink. (Penciled forms will not be accepted.)

e fo	ollowi	ng chang	es in eni	ollment are requested f	or Semester:	⊐Fall ⊐	Spring □Summer □Oth	ner	Acad	demic ye	ear:
	Dept.	Course #	Section	Course Title	Days/Time	Credits	Signature of Division Chair (ma	y be requir	ed for enrollment)	Date	Audit?
_											□Yes
4											□No
											□Yes □No
_											□Yes
ן											□No
											□Yes
											□No
	Dept.	Course #	Section	Course Title	Days/Time	Credits	Date		Reason for dropping:		
D									Employment	0	
R									Financial		
_									Health		
O ∤									Military		
Р									Moving		
									Other		
									Other		
		Number o	of credit hou	irs for the indicated semester follows	owing this action:		L				
				Refund Deadlines in a	sixteen-week semester (C	Classes less tl	nan 16 weeks in duration are refunded	d at a prorate	ed basis)		
udon	t Bosne	onsibility:		100%	refund period = calendar	days 1-7	50% refund period = calendar days 8	8-14			
		•	ubmitted fo	or action to be processed. Stud	dent understands chan	ges in enro	Ilment may affect one or more of t	the followin	g:		
				availability of other financial aid			Private health insurance		antenanta di with Faat	Ot1 O-	th:
	quisite o am leng		e status for	other courses			Other enrollment-based stat	tus eitner c	ontracted with East	Central Co	niege or a thi
J											