

Schedule Change Form

Term: _____

Name: _____ Phone: _____

Date: _____ Program: _____ Social Security No.: _____

Course #	Sect. #	Course Name	Drop	Add	Instructor's Signature

Reason (Please check the box that applies.): Changed Mind Too Difficult Financial Difficulties Other

Student load for term after drop/add: _____ Advisor: _____

- Courses may be added during the first week of the term only.
- Dropping a class during weeks 3-8 will result in a grade of W. Withdrawals after this period will result in a grade of F.
- No tuition will be refunded after the second week of the term.
- A \$25 fee will be charged for schedule changes after the second week of the term.
- I understand that changing my schedule may affect my financial aid.

Student's signature _____ Advisor's signature _____