## Add/Drop/Withdrawal Course Change Form

### Student Information
(Please print)

First Name ____________________ Last Name ____________________ ID #0000 ____________
Undergraduate Program _________ Graduate Program ____________ Major 1 ____________ Major 2 ____________

<table>
<thead>
<tr>
<th>Course ID</th>
<th>Section</th>
<th>Title of Course</th>
<th>Year (SP/SU/FA)</th>
<th>Term</th>
<th>Session A (first 7) Full (15) B (last 7)</th>
<th>Term (SP/SU/FA)</th>
<th>Last Date Student Attended</th>
</tr>
</thead>
<tbody>
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### Courses to be: □ Dropped □ Withdrawn

<table>
<thead>
<tr>
<th>Course ID</th>
<th>Section</th>
<th>Title of Course</th>
<th>Year</th>
<th>Term</th>
<th>Session</th>
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### Last date of attendance required

<table>
<thead>
<tr>
<th>Term (SP/SU/FA)</th>
<th>Last Date Student Attended</th>
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### Courses to be: □ Added

<table>
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<tr>
<th>Course ID</th>
<th>Section</th>
<th>Title of Course</th>
<th>Year</th>
<th>Term</th>
<th>Session</th>
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### Override Permission
- Required for undergraduate students taking 7-week courses. Open to seniors only.
- Required for waiver of prerequisite of a course.

Reason:

- DROPING CREDITS CAN AFFECT YOUR FINANCIAL AID
- Full-time course load:
  - Graduate: 9 credits
  - Undergraduate: 12 credits
- Last Date of Attendance required for ALL Drops & Withdrawals. If no date is provided, the date that the form is processed will determine refund.
- Consult Academic Catalog for all course change deadlines and refund

Total Credits Before ____________ Total Credits After ________________

### Billing Policy
By registering for classes or authorizing charges to be added to your account, you represent to us that you have the intention and ability to pay and you promise to pay for all charges placed on your account as well as any service fees or other fees that may be due. Should your account become delinquent at any time, the University may refer your account to a collection agency and/or litigate to collect the balance of the indebtedness. You agree to be responsible to pay all collection agency fees to the University, which may be based on a percentage at a maximum of 50% of the debt, plus all costs and expenses, including reasonable attorneys' fees, that the University incurs for efforts to collect any amount not paid when due.

### Approvals
(ALL signatures MUST be obtained before form will be processed by Registrar’s Office)

Advisor #1 Signature/Date __________________________________________
Program Chair or Director Signature/ Date (Only for Overrides) ____________________________
Dean Signature/Date (Only for Overrides) ____________________________________________
Student Signature/Date __________________________________________
Director of Financial Aid Signature/Date ____________________________________________
Registrar’s Office ____________________________ Date ____________________________

Registrar’s Office Phone: 973-290-4460  Fax: 973-290-4499