

DROP/ADD FORM

Semester: Summer

Name:	ΤΤΝΤΨ	/	/	D1
Name.		/	/	Phone:

Drop/Add (Specify below)	CRN	Department	Course Number	Section	Credit Hours	*Department/Instructor Approval

If dropping, reason for dropping

*Department/Instructor Approval is needed to add or drop a class after the 5th Day of Class. (Note: this day is determined by the 5th day of summer classes and not the 5th meeting of the class you are adding or dropping.)

Signatures:

Student

Date

Director of Summer Sessions Date

This change will not be official until signed by the Director of Summer Sessions. Please sign the form and carry, fax, or scan and email it to the Office of Summer Sessions. **DO NOT MAIL**.

Received- Summer Sessions'Ofc.	Processed -Summer Sessions' Ofc.	Date