

Schedule Adjustment Form

(REV. 10/19)



Term _____
 Year _____
 Current Major _____

SECTION A

Last Name _____ First Name _____ M.I. _____

Student ID# _____ Phone (_____) _____

Email _____ Birth Date _____

- Do you wish to withdraw from all courses? (circle one) **NO YES**
 If you circled **NO** for question 1, please complete Sections B and C.
- If you circled **YES** for question 1, **what is the last date you attended class?** _____
 If you circled **YES** for question 1, you must obtain signature from Dean of Students Office and sign the Financial Aid Complete Withdrawal Form when you submit this form to Enrollment Services.

SECTION B – Instructor permission is required to add a class if you do not have the necessary prerequisites. Advisor signature and drop reason are required for every course you drop after add/drop ends*

	Audit Y/N	CRN	Course Number	Credit Hours	Did you attend? Y/N	Drop Reason <i>See List Below</i>	Adds Instructor signature when required
Sample	N	80214	Math 1111	3	Y	C	
Add							
Add							
Add							
Add							
Drop					Did you attend? Y/N	*Drop Reason* <i>See List Below</i>	*Drops* Advisor signature required after add/drop
Drop							
Drop							
Drop							
Drop							

Please indicate your primary reason for dropping the course above. A=Financial; B=Health; C=Work; D=Family Issues; E=Academic Difficulty; F=Issues with Instructor; G=Transportation; I=Childcare; J=Course Content; K=Course not needed; L=Other (specify _____); M=Technical Issues; N=Time Management

SECTION C – The schedule adjustment process is not complete without all signatures above and below. Schedule adjustments may require repayment of financial aid funds.

Student Signature _____ Date _____

Dean of Students (complete withdrawal only) _____ Date _____

Signed Financial Aid Form (complete withdrawal only) _____ Date _____

Enrollment Services Signature _____ Date _____

White-Enrollment Services * Canary Yellow-Financial Aid * Pink-Student Copy