## OFFICE OF ACADEMIC RECORDS

Use only after the Drop/Add deadline and before the Withdrawal deadline of the current semester.

4150 Administration Drive, Ber	rien Springs, MI	49104-080
Phone: 269-4	71-3375 <b>Fax:</b> 2	269-471-600



## Drop/Add Form

Student I.D. Number: \_\_\_\_\_ Name: \_\_ Term: \_\_\_\_\_ **INSTRUCTIONS — PLEASE READ** ACADEMIC DEAN'S SIGNATURE NEEDED FOR THE FOLLOWING ▶ Please type or print clearly in ball point pen. Completed forms must be returned to the Office of Academic Records. 1. Students on ACADEMIC PROBATION (include credits approved). ▶ Check signatures required: (www.andrews.edu/services/registrar/. OR Registration Brochure OR call (269) 471-3375). 2. Students taking an **OVERLOAD** (include credits approved). 3. Adding Classes after the end of ADD/DROP period (see website or Academic Calendar). 1. INDEPENDENT STUDY: MUST include Topic of study. 4. Comment below regarding request for back date. 2. AUDIT: Instructor MUST sign the DROP/ADD form for the class that is being audited. 3. OVERLOAD: See Student Financial Services first (Grad overload: 13+ credits, UG overload: 17+ credits). Credits Approved Academic Dean Date 4. This form should **NOT** be used for students withdrawing from all courses. Use a Student Exit Procedure form. Comments: A fee will be charged for registration changes except in the following cases: 1) Changes made during the DROP/ADD period. 2) Official Cancellation of a class. Please consult the current Bulletin for the most up-to-date fees. **AUTHORIZATION:** Signatures of officials as needed: Office of International Services (Visa Students dropping below full-time) Date Credits Approved Student Financial Services Date DROP Full signatures required Course Course Acronyms Sec. Advisor CRN **COURSE TITLE** Credits and Numbers No. Instructor **ADD** Full signatures required Credits Override COURSE TITLE: TOPIC OF STUDY Course Acronyms Sec. ("AU" for Audit Course Instructor Advisor CRN (Pre-Req and Numbers No. and include (Independent Study, Readings, Project, Thesis, Dissertation, Field Work) or Co-Reg) credits) Comments Student Signature Date Academic Records Office Signature Date