

Change of Course Request

Undergraduate Students

UNIVERSITY						Student Name:										
						Student Home School: Term/Year (e.g., Fall 14):					A&S	BLR	ENG	GPC		
d	SUBJE ARE		OURSE JMBER	SECTION	YES CLASS NUMBER	Day/Time							านnication as appr	ropriate.		
DROP																
			Will drop	ping any abo	ove course(s) le	eave you below 12	credit hours?	Υ	/	N			NOTE:			
			graduate this sem	ester or next?	Y	/	N		Effective date is the date form							
Are you now, or have you ever been on academic probatio									/	N		is received by the home school's				
	Are	you taking a	a graded	course "Pass,	nn that which you a	ch you are dropping?* Y / N Office of Aca				cademic Servic	es					
						ed. Courses dropped ed deadline for with		ine to "dro	op w	ith no	entry on t	the record" will b	e entered on the	e student's		
EDIT	SUBJECT AREA	COURSE NUMBER	SECT.	YES CLASS NUMBER	Day/Time	Will this add put you above 18 hours? Y/N	Request For Audit? Y/N**	Request for Pa grade basis in a t graded course?			pically	INSTRUCTOR APPROVAL Attach written/email communication as appropriate.		il		
ADD / EDIT																
	ain courses	are not eliai	ble to audi	it No permane	ent record is ker	ot of audited courses	1	k	***	Must m	neet nass/	fail eligibility red	quirements			
CCT	am edarses	are not engin	ore to add.	a vo permane	merecord is nep	n of address	•		•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	icer passy	, a.r. englemey rec	jun ememes.			
Adviser's PRINTED NAME & Signature						Date		Math DUS approval (Required for changing sections of or adding Math courses.)					Date			
Student's Signature						Date	*Advi	*Advising Dean's approval (if necessary) Date								