



REGISTRAR'S OFFICE DROP/ADD FORM

	YEAR
<input type="checkbox"/> Fall	_____
<input type="checkbox"/> Spring	_____
<input type="checkbox"/> Summer #1	_____
<input type="checkbox"/> Summer #2	_____
<input type="checkbox"/> Summer A	_____
<input type="checkbox"/> Other	_____

USciences ID #: _____

Student's Full Name: _____
(Last) (First) (Initial)

Major: _____ CLASS LEVEL: 1 2 3 4 5 6 GRAD NON-MATRIC
(Circle One)

DROP:

SUBJECT	COURSE NUMBER	SECTION	COURSE NAME	CREDITS

ADD:

SUBJECT	COURSE NUMBER	SECT	COURSE	CR	SIGNATURE IF REQUIRED	
					INSTRUCTOR/DEPT. CHAIR	REASON FOR SIGNATURE

I have received a copy of the USciences Tuition Re-payment Policy and agree to comply with all terms thereof.

X

Student Signature (required) Date Advisor Signature (required for 1st & 2nd year only) Date

<p>POLICY STATEMENT: Students are not permitted to register for more than 20 credit hours per semester without written permission from the Dean of the college in which the student is pursuing a degree. If granted, the student will be assessed a fee for each credit in excess of 20 credit hours per semester. This fee will be equal to the prevailing per credit tuition rate.</p>			
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%; padding: 2px;">COLLEGE DEAN SIGNATURE</td> <td style="width: 30%; padding: 2px;">DATE</td> </tr> </table>	COLLEGE DEAN SIGNATURE	DATE	
COLLEGE DEAN SIGNATURE	DATE		