

Processed By: _____

Date: _____

SCHEDULE FORM

Use this form to register, add, drop, withdraw, or change the grading option or degree level of a class.

Last Name	First Name		Middle		Term		
R - Register A – Add D- Drop C- Change W- Withdraw	Course Number	Title	Number of Credits	P/F AU	UG/GR Credit	Indicate below what special approval is being granted (waive pre-req, over-enroll, etc)	Signature for Special Approval (see box to left)
Directory of Cl such policies a	lasses and the Undergraduate and (iversity as a result of this registration.		*Tot	al Numbe	r of Registered Credits	
* 17 ½ - 18 credit	s – Required Signature:	Advisor					
* 18 ½ + credits – Required Signatures: Advisor		and		Dean /	Associate Dean		
* Over 12 cr in Summer (or over 6 in any Summer session) – Required Signatures:			Adviso	Advisor and Academic Services			Name de la constante de la con