

**Lindsey Wilson College**

**DROP/ADD FORM**

Student's Name \_\_\_\_\_ ID No. \_\_\_\_\_

Term \_\_\_\_\_ Date: \_\_\_\_\_

**SCHEDULE CHANGES**

(Check as many of the boxes below as are applicable to each course.)

CRN No.				Department				Number				Section		Credits	Repeat	Drop	Add	Instructor's Signature

Signatures: **Remember to get advisor and instructor signatures before bringing to the Registrar's Office.**

Advisor: \_\_\_\_\_

Reason for Change: \_\_\_\_\_

Student: \_\_\_\_\_

Changing Hrs From: \_\_\_\_\_ to \_\_\_\_\_

Academic Affairs: \_\_\_\_\_

<input type="checkbox"/> Veteran	<input type="checkbox"/> Athlete	<input type="checkbox"/> Resident
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Registrar: \_\_\_\_\_ Date: \_\_\_\_\_

**\*\*\*Prior approval and signature from Academic Affairs is required for anything over 17 hours or for day students wanting to add AIM classes**