

COURSE DROP/ADD FORM

Name: _____
(Last, First, Middle)

Date: _____

Term: _____

DROP

Course No.	Section	Course Title	Instructor's Initials
		Drop	

ADD

Course No.	Section	Course Title	Instructor's Initials
		Add	

Approved by: _____
(Academic Advisor's Signature)

Coach: _____
(Coach's Signature required for all Athletes)

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