

Questions regarding data collected may be directed to the Registrar. (HB 1922)

Student ID OR Social Security Number	Last Name	First Name	Middle Name
Date of Birth	Daytime Telephone Number		
E-mail	Program <input type="checkbox"/> SPH <input type="checkbox"/> SBS <input type="checkbox"/> Pharm		International Student? <input type="checkbox"/> YES <input type="checkbox"/> NO

ADD CLASS: List all courses you wish to add.

See [Academic Calendar](#) for registration periods and the last day to add classes.

Department (EXAMPLE) BACH	Course (EXAMPLE) 5310	Title (EXAMPLE) Community Assessment

DROP CLASS: List all courses you wish to drop.

Approval for drop required after last day to receive automatic W. See [Academic Calendar](#) for details.

Department	Course	Title	Instructor Signature	Grade <i>(Instructor Only: Check one)</i>
				<input type="checkbox"/> W (Withdrawal) <input type="checkbox"/> WF (Withdrawal Failing)
				<input type="checkbox"/> W (Withdrawal) <input type="checkbox"/> WF (Withdrawal Failing)

IF DROPPING A CLASS, RETURN THIS FORM TO THE OFFICE OF THE REGISTRAR & PLEASE READ BELOW:

- It is your responsibility to consult your advisor before dropping any class.
- A class dropped before the census date will not appear on the transcript. A class dropped after the census date will appear on the transcript & be assigned a grade of W or WF.
- Refunds:
 - If the last class of a session (8 week 1, regular, 8 week 2) is dropped, it is subject to the complete withdrawal refund schedule.
 - If a class is dropped but the student is enrolled in another class during that same session, the student will receive 100% refund if the class is dropped before the census date.
- You cannot drop your only remaining class using this form during a long semester (fall or spring).
 - If all classes are dropped during a long semester, it is considered complete withdrawal or leave of absence. You must pick up the withdrawal/leave of absence form in person at the Office of the Registrar. SPH online certificate students are exempt from requesting a leave of absence.

Student Signature

Date

Please allow 24 hours for processing

For Office Use Only