

## **Schedule Change Request Form**

## This form is used for the following purposes:

- 1) To make changes to your original registration.
- 2) To withdraw from a course.

Instructions, policies, and deadlines for each of these procedures are in the course book for the current term. COMPLETE ALL SECTIONS THAT APPLY. Press firmly with a ballpoint pen so that all three copies are legible. This form will not be processed without the signature of both the student and advisor. International students must also have the approval of the Coordinator of International Student Development (ISD). COURSE WITHDRAWALS MAY JEOPARDIZE PRESENT FINANCIAL AID. YOU MUST SEE THE FINANCIAL AID OFFICE.

ALL STUDENTS MUST REGISTER FOR THEMSELVES. It is NOT the responsibility of the Advisor(s) to complete or forward Registration and/or Schedule Change Request forms to the Office of the University Registrar.

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Last Name			First Na	me	Middle			□ Fall			
Address (If you have a new address, fill out a change of address form.)									□ Spring		
City			State		Zip			□ Summer I			
 Home Phone					Work Phone			☐ Twelve Week			
HOITIE FITOTIE	;		WORKTHONE					□ Summer II			
Major					Student Number			☐ Year: 20			
	SES TO B										
Prefix	Number	Section	Credits	Times		Days	Roo	m	Fees		
COLIDS	ES TO BI		ED:								
Prefix	Number	Section	Credits	Instuctors Sig	nature	"W"/"F"					
Student Signature Date					Advisor Si	Advisor Signature				Date	
					ISD Appro	val				Date	
Distribution: White-Office of the University Registrar Canary-Department Pink-Student										2012_322_1	