

Semester \_\_\_\_\_

Date \_\_\_\_\_ EMPLID \_\_\_\_\_ Last Name \_\_\_\_\_ First Name \_\_\_\_\_

The following changes are to be made to my current semester schedule:

	Class No.	Subject	Course No.	Course Title
DROP	_____	_____	_____	_____
DROP	_____	_____	_____	_____
.....				
ADD	_____	_____	_____	_____
ADD	_____	_____	_____	_____

\_\_\_\_\_  
Advisor's Signature or Semester PIN

Total hours BEFORE Add/Drop \_\_\_\_\_  
Total Hours AFTER Add/ Drop \_\_\_\_\_