

# Change of Schedule

RETURN TO 112 MOSLER HALL



Do NOT use this form for your initial registration on this campus.

FALL SEMESTER     SPRING SEMESTER     SUMMER

Banner ID# or SSN

Name

Date

Phone

 USE THIS SECTION TO **DROP** A CLASS

| CRN | DEPT | CRS # | SEC | INSTRUCTOR'S SIGNATURE |
|-----|------|-------|-----|------------------------|
|     |      |       |     |                        |
|     |      |       |     |                        |
|     |      |       |     |                        |

 USE THIS SECTION TO **ADD** A CLASS

| CRN | DEPT | CRS # | SEC | INSTRUCTOR'S SIGNATURE |
|-----|------|-------|-----|------------------------|
|     |      |       |     |                        |
|     |      |       |     |                        |
|     |      |       |     |                        |

 USE THIS SECTION TO CHANGE STATUS TO **CREDIT/NO CREDIT** OR **AUDIT**

| CRN | DEPT | CRS # | SEC | INSTRUCTOR'S SIGNATURE |
|-----|------|-------|-----|------------------------|
|     |      |       |     |                        |
|     |      |       |     |                        |

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