

## Office of Records and Registration DROP and ADD Form

O NIVE		( CIRCLE ONE →	Fall/Spring	/ Summe	r
PRINT YOUR NAME:			Today's Date:		
Student ID:		Your DU Advisor: Your N		r Major:	
DROPs – Cours	se(s) y	ou wish to DROP fro	m your schedule:		
Course Prefix & Number Example: ENG-111	Sec# <i>001</i>	Course Title  Expository Writing		Instructor Name	
1.					
2.					
3.					
	o(s) vo	u wish to ADD to you	ur schedule:		
Course Prefix & Number  Example: ENG-111	Sec# 001	Course Title	Instructor Name	Professor Signature	Full Section
Example. E1VO-111	001	Expository writing		Signature	Section
1.					
2.					
2.					
3.					
4.					
1.					
5.					
6.					
PLEASE READ: With you not required for standard of meeting major requirement	drop activit its and gra	e below, you acknowledge academic of the second consult with your advist duation requirements. It is your resplarding registration activities.	or if needed regarding how sched	ule adjustments impact your	progress toward
STUDENT SIGNA	ATURE	:	Date:		
Required to Add Classes Academic Advisor:			Date		
<u>Required for Late</u> Academic Af			Date		

Return this completed form to the Office of Records and Registration (must show your ID to drop/add)