



COURSE CHANGE REQUEST – ADD/DROP FORM

Student Name: _____ ID#: _____

Class of: _____ Today's Date: _____

ADD	
Course Name: _____	
Course Number: CLNS: _____	Course Dates: _____ to _____
Dept. Signature: _____	Date: _____

For OMSA use only: CRN: _____ DB: _____ INB: _____

DROP	
Course Name: _____	
Course Number: CLNS: _____	Course Dates: _____ to _____
Dept. Signature: _____	Date: _____

For OMSA use only: CRN: _____ DB: _____ INB: _____