

-   -        
 STUDENT ID NUMBER

# Drop / Add Form



LAST NAME FIRST NAME M.I.

Term of Drop/Add  

Year	Fall	Spring	Summer
20__	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

School	Date of Change
--------	----------------

**INSTRUCTIONS:**

1. PRINT all information except signature
2. Fill in all requested information; course ID, course title, call number, grade type and credit hours
3. If you make a mistake, cross out line with error and use a new line
4. When completed, turn in at your school / advising center

**ADDS:**

Course ID (incl. section number, ex: ENGL-101-01)	Course Title	Grade Type	Credit Hours	Instructor's Approval
_____	_____	<input type="checkbox"/> Regular <input type="checkbox"/> Audit <input type="checkbox"/> S/U	_____	_____
_____	_____	<input type="checkbox"/> Regular <input type="checkbox"/> Audit <input type="checkbox"/> S/U	_____	_____
_____	_____	<input type="checkbox"/> Regular <input type="checkbox"/> Audit <input type="checkbox"/> S/U	_____	_____

**DROPS:**

Course ID (incl. section number, ex: ENGL-101-01)	Course Title	Grade if Required	Instructor's Signature	Registrar's Office Use Only
_____	_____	<input type="checkbox"/> W <input type="checkbox"/> WF	_____	1 2 3 4 0
_____	_____	<input type="checkbox"/> W <input type="checkbox"/> WF	_____	1 2 3 4 0
_____	_____	<input type="checkbox"/> W <input type="checkbox"/> WF	_____	1 2 3 4 0

**CHANGES:**

To change **GRADE TYPE** for a course in which you're already enrolled

Course ID (incl. section number, ex: ENGL-101-01) \_\_\_\_\_

Change grade type to:  Regular  S/U

---

To change **GRADE TYPE TO AUDIT** for a course in which you're already enrolled

Instructor's Signature \_\_\_\_\_

---

To change **CREDIT HOURS** for a course in which you're already enrolled

\_\_\_\_\_ New Credit Hours

Student's signature (Required)

---

Undergraduate Advising Center (for Full-Time Undergraduates)

---

School of Continuing Studies Dean (for Part-Time School of Continuing Studies students)

---

Graduate Divisions Dean (for Graduate/Professional students)

Your total credit hours after changes on this form \_\_\_\_\_

NOTE: Tulane encourages you to seek help from your advisor and your college regarding course choice. Remember, your schedule is your responsibility.