



ADD / DROP / WITHDRAWAL FORM

Name: _____ ID: _____ Term: _____ Year: _____

Please **ADD** the following course(s) to my schedule:

<u>COURSE #</u>	<u>SECTION</u>	<u>LAB</u>	<u>TITLE</u>	<u>HOUR</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Please (*circle one*) **DROP OR WITHDRAW** the following course(s) from my schedule:

<u>COURSE #</u>	<u>SECTION</u>	<u>LAB</u>	<u>TITLE</u>	<u>HOUR</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

<p>Are you an International student? ____ If yes, you must see Amanda Hruska or Kristi Vogel before dropping any courses. PDSO Signature: _____</p> <p>Do you participate in Lakeland athletics? ____ If yes, you must see April Arvan before dropping any courses. AD Signature: _____</p> <p>Do you receive military benefits? ____ If yes, you must see Sue Bialk before dropping any courses. VBC Signature: _____</p>

Student Signature _____
Date

Advisor Signature _____
Date

For Withdrawals: _____
Course Instructor Signature _____
Date

For Office Use Only	
Computer Updated By: _____	Date _____
Notes: _____	