

# Undergraduate Course Add/Drop Form



**CONCORDIA  
UNIVERSITY  
CHICAGO**

Term:  Fall 20\_\_\_\_  Jan 20\_\_\_\_  Spring 20\_\_\_\_  Summer 20\_\_\_\_ Class Level:  FR  SO  JR  SR

Name: \_\_\_\_\_ H#: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Are you an athlete?  Yes  No If yes, please read and initial the following statement.

*I understand that dropping below 12 semester hours and/or retaking courses may affect my eligibility during current and future semesters and I will need to discuss possible ramifications with my coach and/or Athletic Director.* Student Initials: \_\_\_\_\_

Are you registering for a correspondence course?  Yes  No

If yes, anticipated term of completion:  FA 20  SP 20  SU 20 Student Initials: \_\_\_\_\_

*I understand that it is my responsibility to consult with Student Business Services and Financial Planning prior to submitting my registration form to add or drop courses because an increase or decrease in credit hours may impact my financial aid eligibility, and therefore affect my tuition bill, for which it is my responsibility to pay.*

➔ Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**ADD Course(s):** Note: Addition of courses may impact your financial aid package; going above the max hours for a term will result in an overload fee per credit hour and requires approval. **\*\*Some courses may require instructor consent or department approval to register; please review course descriptions and obtain signatures as needed prior to submission.**

CRN	Course Prefix and Course #	Course Title	Credits	Audit	**Instructor Consent/ Department Approval (if necessary)	Waitlist	Retake	Day/Time
				<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
				<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
				<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
				<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
				<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	
				<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	

### DROP Course(s):

Note: Dropping below 12 (15 if you have an Illinois MAP grant) semester hours may jeopardize your financial aid package and eligibility for inter-collegiate athletics. Dropping to 0 credits in either semester may constitute withdrawal from the university, which is handled through the Student Services Office.

CRN	Course Prefix and Course #	Course Title	Credits	Drop only if Added to Waitlist Class	Advisor Use Only AEWS Drop Recommended
				<input type="checkbox"/> CRN _____	/ /
				<input type="checkbox"/> CRN _____	/ /
				<input type="checkbox"/> CRN _____	/ /
				<input type="checkbox"/> CRN _____	/ /
				<input type="checkbox"/> CRN _____	/ /

Submit completed form to:

The Office of Undergraduate Academic Advising: Addison Hall 155 Lower Level or Fax: 708.209.3167

#### Office Use Only

<p><i>Business Services Pre-Approval:</i></p> <p>Date _____ Initials _____</p>	<p><i>Academic Advising Initial Registration Processing:</i></p> <p>Credit Change: Before _____ After _____</p> <p>Date _____ Initials _____</p> <p>Drop W? <input type="checkbox"/> Stop-Out <input type="checkbox"/> Withdrawal <input type="checkbox"/></p>	<p><i>Academic Advising Waitlist Processing:</i></p> <p>Credit Change: Before _____ After _____</p> <p>Date _____ Initials _____</p>
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