

**COURSE DROP/ADD/WITHDRAWAL FORM FOR GRADUATE STUDENTS**

PROCEDURE: Student completes all boxes that apply. Please return this form intact to the Graduate Student Services Office, Smyth Hall, Room 1. Phone: (585) 389-2815 Fax: (585) 389-2612 Email: gradservices@naz.edu

Term \_\_\_\_\_ Student ID# or S.S. # \_\_\_\_\_ Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

This is my first term of enrollment in the graduate program.

Day Phone: \_\_\_\_\_

NOTE 1: Course withdrawal – grade of W is assigned when the Drop/Add period has ended.  
Grade of F is assigned once the withdrawal period has ended.

Eve Phone: \_\_\_\_\_

NOTE 2: Consult your current term registration brochure for Drop/Add period refund/grade schedule.  
NOTE 3: Refunds involving Federal Title IV monies are subject to required Financial Aid calculations.

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

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

DROP OR WITHDRAW FROM COURSE(S)			
Course Number (ex: EDU 501)	Section (ex: 30)	Credit Hours	Date of last class attended

ADD COURSE(S)		
Course Number (ex: EDU 501)	Section (ex: 30)	Credit Hours

<b>FOR OFFICE USE ONLY</b>	Refund, if applicable _____% for # Credit Hours ____ <input type="checkbox"/> Drop	Total Credit Hours for the Term: Before change ____ After change ____
	Tuition due, if applicable \$ _____ for # of Credit Hours ____ <input type="checkbox"/> Add	<input type="checkbox"/> Term Withdrawal <input type="checkbox"/> Defer Start <input type="checkbox"/> Program Withdrawal
	Processed by: _____ Date: _____	<input type="checkbox"/> Additional copies to advisor, program director and instructor for withdrawal

White - Graduate Student Services

Yellow – Student Accounts

Pink – Student