### Drop/Add Form

**Student Number**

**Student Name (Last, First, Middle Initial)**

**School/Level/Class**

**Major/Minor**

**EFFECTIVE DATE**

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**Email address**

**Please leave a number where you may be reached if we have any questions regarding your registration:**

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#### Drops

<table>
<thead>
<tr>
<th>DEPT</th>
<th>COURSE #</th>
<th>SECTION</th>
<th># OF CREDITS</th>
<th>U/G</th>
<th>CREDIT ONLY</th>
<th>COMMENTS AND/OR RETROACTIVE DATES</th>
</tr>
</thead>
</table>

#### Adds

<table>
<thead>
<tr>
<th>DEPT</th>
<th>COURSE #</th>
<th>SECTION</th>
<th># OF CREDITS</th>
<th>U/G</th>
<th>CREDIT ONLY</th>
<th>AUDIT</th>
<th>COMMENTS AND/OR OVERRIDE SIGNATURES</th>
</tr>
</thead>
</table>

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**Comments:**

**Note:** Justification must be provided by the Dean when fees are waived or retroactive dates recommended (Please include signature).

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Complete Withdrawal: As a result of dropping these courses the student will be withdrawn from the University for this semester:

Yes [ ]

No [ ]

**Reason for Complete Withdrawal:** (Check one)

- [ ] Academic Difficulty
- [ ] Deceased
- [ ] Employment
- [ ] Financial Difficulty
- [ ] Health
- [ ] Never Attended Current Term
- [ ] Not Returning to UM
- [ ] Personal / Transfer / Marriage
- [ ] Study Abroad
- [ ] Withdrawn
- [ ] Withdrawn By University
- [ ] Ineligible To Return To Any Program

**Dean**

**Date**

**Advisor**

**Date**

**Student Signature**

**Date**

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**Maximum number of credits approved by Dean:**

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**For Registration Use Only**

**Processed By:**

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**Date Processed:**