



ADD/DROP FORM

Registrar's Office
256.726.7353
registrar@oakwood.edu

Application Date: _____

STUDENT INFORMATION

First Name _____ Last Name _____ ID# _____

Email Address (*Oakwood University email address*) _____ Cell Phone _____

Classification: Freshmen Sophomore Junior Senior

Term/Year: Fall _____ Spring _____ Summer _____

COURSE INFORMATION

NOTE: Instructor's Signature only needed if form is submitted after the last date to add a class!

Drop/Add (D or A)	Course Code	Section	Course Title	Credit Hours	Start Time	Instructor's Signature <small>Required for Late Entry/Drops</small>

Total Hours Registered **BEFORE** Change: _____

Total Hours **AFTER** Change: _____

Reason for Change(s): Classes Dropped Class Cancellation Changing Sections Personal Preference OTHER*

*Other Reason: _____

SIGNATURE INFORMATION

Student Signature _____

Date of Signature _____

Advisor's Signature _____

Date of Signature _____

Student Accounts Signature (*Required if AFTER change hours are more than 16 hours*) _____

Date of Signature _____

Financial Signature (*Required if AFTER change hours are less than 12 hours*) _____

Date of Signature _____

Academic Administration (*Required during withdrawal period/other circumstances required by Registrar*) _____

Date of Signature _____