



NOTRE DAME  
 OF MARYLAND  
 UNIVERSITY

## CHANGE IN REGISTRATION: DROP/ADD FORM

Student ID # \_\_\_\_\_ Name \_\_\_\_\_  
*Last* *First*

Please check your student program:

Women's College \_\_\_\_\_ College of Adult Undergraduate Studies \_\_\_\_\_ Graduate Studies \_\_\_\_\_

Preferred phone # \_\_\_\_\_ This is:  Home  Cell  Work

**I WISH TO DROP:**

Course ID	Section	Lab	Auditing	Course title	Credit hrs.
<i>Sample: BUS211</i>	<i>01</i>		✓	<i>Principles of Accounting I</i>	<i>3</i>
<b>Total</b>					

Reason for dropping: \_\_\_\_\_

Total # of semester credits after this authorization \_\_\_\_\_

**I WISH TO ADD:**

Course ID	Section	Lab	Auditing	Course title	Credit hrs.
<i>Sample: BUS211</i>	<i>01</i>		✓	<i>Principles of Accounting I</i>	<i>3</i>
<b>Total</b>					

Reason for adding: \_\_\_\_\_

Total # of semester credits after this authorization \_\_\_\_\_

***By my signature, I acknowledge my responsibility for payment of the tuition and fees generated by this withdrawal. I have read and understand the University policies with respect to withdrawal and refunds as posted on the Registration Course and Exam schedules page of the website.***

***Refund schedule: refund dates are noted on the academic calendar at <http://ndm.edu/academic-calendar>. Refund and withdrawal policies can be found at <http://ndm.edu/business-office/tuition-fees>.***

***Financial Aid - Your award may be reduced if you receive financial aid and withdraw from classes.***

***I understand and accept the responsibility these changes will have on achieving my educational goals.***

\_\_\_\_\_  
 Academic Advisor's signature Date Student's signature Date