



Circle Term: Fall Spring Summer  
Year: \_\_\_\_\_

**REGISTRATION/ADD/DROP FORM**

<b>STUDENT INFORMATION</b>	_____			
	Last Name	First Name	Middle Name	SSN or Id-No
	Birthdate	Contact # (Work/Day or Cell)	Secondary Email Address	

**NOTE: If you have had an address change, please complete and submit the change of address form found on the Registrar website.**

**REGISTRATION/COURSES ADDED: (Courses may not be added after official add period ends.)**

**NOTE:** Please do not list courses added via CampusWEB.

Dept BY	Course#	Section	Title	Day/Time/Location	Hours	Instructor Approval (if required)	Dept. Chair/Dean Appr./Pre-Req. Waiver	Dept. Chair/Dean Approval/ Course Filled
	123	G1	Sample Course	Student Hall MWF 8-9	3.0			

**COURSES DROPPED: \*(Student will earn a grade of "F" for all courses dropped after mid-session. See Registrar website for drop schedule)**

Dept	Course#	Section	Title	Hours

**Registrar Processing:**  
 Processed By: \_\_\_\_\_ Date: \_\_\_\_\_  
 Form scanned: \_\_\_\_\_

**REGISTRAR COMMENTS:**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Students are responsible for seeing that a Drop Form is completed and processed to correct their academic and billing records.  
 \*Grade appeals must be directed to the Provost and Vice President for Academic Affairs. There must be appropriate documentation and rationale for a grade change from a "F" to a "W". Stating a reason does not guarantee that the grade will be changed. Submitting a request does not guarantee the grade of "F" will be changed. Grade appeals must be made within 2 weeks after session ending date in which the grade was earned.  
 ► Hours Added: \_\_\_\_\_ Hours Dropped: \_\_\_\_\_ Hours Before Change \_\_\_\_\_ Total hours: \_\_\_\_\_\*\*  
 \*\*If overloading schedule with more than 18 hours, a Registration Overload Request Form must accompany this Registration Form.

<p><b>X</b> _____                  Student Signature Date</p>	<p>Signature of student indicates understanding of university policy as outlined in the Brenau University catalog. Academic advising is a support service provided to the student. However, ultimate responsibility for course selection lies with the student.</p>
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Adviser Signature: \_\_\_\_\_ DATE: \_\_\_\_\_  
 Adviser signature required for 1<sup>st</sup> semester and indicates an approval of the student's schedule.

Registrar/VPAA Signature: (If required) \_\_\_\_\_ DATE: \_\_\_\_\_

► **STUDENT ACCOUNT INFORMATION:** No Brenau official other than the Controller may authorize credits or refunds of tuition. Advisers, coordinators and directors have no authority to grant or make commitments concerning credits or refunds. Tuition reversals are first applied toward outstanding balances on the student account and the Controller must approve all refunds of credit balances. The student must understand that a request for a credit or refund in no way guarantees either, as the Controller must approve this request after examining the account.

► **REFUND INFORMATION:** Please allow 10 business days for the processing of tuition credits to the student account. If applicable, please contact the Accounting Office in writing with your request for a refund. If refund is not requested in writing, a credit will be issued to your account. Refunds will generally be processed within thirty (30) days after all necessary documentation is received and processed. Please contact the Accounting Office for information concerning student accounts. Please see the Accounting Office website or the Financial Information section in the catalog for the full refund policy.

**Student Accounting Office use only**

Action Taken: \_\_\_\_\_

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