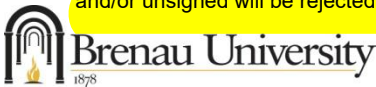


This form must come from a Brenau adviser. Forms must be completed by hand, signed and scanned/emailed or faxed. Forms that are edited and/or unsigned will be rejected. Forms that are electronically submitted by a student will be rejected. Students must submit in person.



Circle Term: Fall Spring Summer
Year: _____

REGISTRATION/ADD/DROP FORM

STUDENT INFORMATION	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>X _____ 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 1st 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: _____