

# ADD/DROP FORM (Revised 9/16)

DUTCHESS COMMUNITY COLLEGE OFFICE OF THE REGISTRAR

Office Initial \_\_\_\_\_

NAME \_\_\_\_\_ HOUSING STUDENT Yes  No  SEMESTER \_\_\_\_\_  
LAST FIRST MI  
 STUDENT ID NUMBER: **A** \_\_\_\_\_ DATE INITIATED \_\_\_\_\_ DATE COMPLETED \_\_\_\_\_

## DROP

## ADD

CRN LEC	CRN LAB	COURSE	SECT	CR	PART of TERM	CRN LEC	CRN LAB	COURSE	SECT	CR

**REQUIRED SIGNATURES:**

TOTAL CREDITS: PRIOR TO CHANGE \_\_\_\_\_ AFTER CHANGE \_\_\_\_\_

\_\_\_\_\_  
 ADVISOR / REGISTRAR REPRESENTATIVE

\_\_\_\_\_  
 STUDENT ACCOUNTS

\_\_\_\_\_  
 FINANCIAL AID

\_\_\_\_\_

Having reviewed the accuracy of this information, I understand that a drop in credits may affect current or future financial aid eligibility or eligibility for personal health insurance. I will refer to the College Catalog for the refund policy.

\_\_\_\_\_  
**STUDENT SIGNATURE** (Not required for administrative drops of failed prerequisites.)

**FOR OFFICE USE ONLY:**

**DELETE:**                       100%       75%  
 **WITHDRAW:**                       50%       25%       0%  
 **ADM. WITHDRAW:**                       \_\_\_\_\_%      \_\_\_\_\_