

Request for Change of Student Schedule

All add/drop requests must be submitted using this form. After processing, this form will be mailed to you indicating whether or not the request was approved. **Submission of this form does not guarantee approval so please check your schedule on line.** The student is responsible for attendance in the original class until confirmation of the change is received. Requests for changes to closed classes will not be considered. Please be aware of additional restrictions to the add/drop policy for limited enrollment courses. Complete withdrawals will be subject to the WSCL refund policy in effect at the time of the drop, as well as the Federal Return of Title IV, when applicable. Withdrawing from WSCL or dropping units may affect your Financial Aid.

Date: _____ Student ID Number: _____ Semester: _____

Program of Study: _____ Full-Time Part-Time

First Name _____ MI _____ Last Name _____

Street Address _____

City _____ State _____ Zip _____

Phone: _____ Email: _____

CHECK ONE: Add/Drop Leave of Absence Complete Withdrawal Record Correction

Change(s) Requested:

CIRCLE ONE	CRN	CRSE #	SEC	COURSE NAME	INSTRUCTOR	UNITS	Approved
ADD DROP							YES NO
ADD DROP							YES NO
ADD DROP							YES NO
ADD DROP							YES NO
ADD DROP							YES NO
ADD DROP							YES NO

Student Comments: _____

Student Signature _____ Date: _____

WSCL Comments: _____

WSCL Signature/Title: _____ Date: _____

Registrar's Office: Date Processed _____ Effective WD/Notification Date _____

Processed by _____ Total Units: before change _____; after change (billing) _____ (academic) _____

REFUND/CREDIT PROCESSING

Tuition FT PT PU _____	_____%	\$ _____	Student Refund	\$ _____
Registration Fee	_____%	\$ _____	<i>Student refund, if any, will be mailed or processed as a direct deposit.</i>	
Student Fees	_____%	\$ _____	Refund to Federal Programs	\$ _____
Parking Fee	_____%	\$ _____		
Student Health Insurance	_____%	\$ _____		
Other _____	_____%	\$ _____	Balance Due From Student	\$ _____
	Total	\$ _____	<i>Payment is due upon receipt. Please contact the Student Accounts Office.</i>	

See attached for Federal Refund/Return Calculation Reviewed by _____ Date _____