Ohio Northern University - ADD/DROP Course Request Form



STUDENT ID#			(NAME) LAST FIRST			MIDDLE MAJOR					TERM YEAR		
Courses to ADD						Courses to DROP						IF COMPLETE WITHDRAWAL,	
CRN	SUBJECT	COURSE	SECTION	CREDIT HRS	Office Use	CRN	SUBJECT	COURSE	SECTION	CREDIT HRS	Office Use	Signatures required:	CK HERE
												Advisor Signat	ure and Date:
												Dean, Associa Assistant Dean Sig	
								(2) L				Office of Residence and Date (if in	
			TOTAL					1/2				Controller Signa	ture and Date:
STUDENT Signature Please complete ALL that apply:							ADVISOR Signature					☐ IF HOLDS, CHECK Signature(s) required:	HERE
	-			ours total fo	or Law studen	ts) Total	I number of h	ours:				Controller/Date:	
	☐ I am enrolling in over 19 hours total (18 hours total for Law students). Total number of hours:												Admissions/Date:
Signature of Dean, Associate Dean, or Assistant Dean: Date:												Human Resources/Date:	Other/Date:
Signature of Dean, Associate Dean, or Assistant Dean: Date:													
_				r which I pla	in to enroll.							For Registrar's Use Only:	
First Course Instructor Signature and Date:Second Course Instructor Signature and Date: My total number of hours is dropping below 12 (not full-time enrollment).												Taken by: Date:	
												Processed by: Da	ate:
(required for all) Financial Aid Officer Signature and Date: At					for student athletes) (required for international students) ctor Signature and Date: Academic Affairs Signature and Date:						Add/Drop Form Rev. 8/16/2012		