

ADD/DROP FORM

POLICY: This form is used to add or drop courses during the Add/Drop period or to drop a course after the Add/Drop deadline. Requests to add courses after the Add/Drop deadline require approval from the course instructor and the department chair. Refer to the Registration policy in the Student Handbook for details.

Adding or dropping courses may impact a student's enrollment status, expected date of graduation, and financial aid eligibility. If a student receiving financial aid withdraws from all courses before 60% of the term/semester has expired, a Return of Title IV Funds calculation will be performed to determine how much financial aid has been earned. This calculation may lead to a return of funds to the lender and may cause the student to owe a balance to the institution. See Financial Aid and Student Account Policies in the Student Handbook for additional information.

NOTE: To add a course, this form must be signed by the student and department chair. To drop a course, only the student's signature is required. A \$30 fee is charged per Add/Drop Form submitted, and \$110 fee is charged for late registration. Department chair approval is required for course auditing. Changing a course status from "Credit" to "Audit" does not carry a fee.

STUDENT INSTRUCTIONS

1. Complete this form, sign it, and send it to your Student Support Counselor:

| | | | | |
|--|---|---|--|---|
| CHICAGO/TCSP@XULA 800.595.6938 (phone) 312.488.6301 (fax) Chistudentsupport@thechicagoschool.edu | ONLINE 800.595.6938 (phone) 312.254.1442 (fax) Onlinestudentsupport@thechicagoschool.edu | DALLAS 800.595.6938 (phone) 214.575.9090 (fax) dalstudentsupport@thechicagoschool.edu | SOUTHERN CALIFORNIA 800.595.6938 (phone) 213.615.7286 (fax) Castudentsupport@thechicagoschool.edu | WASHINGTON, D.C. 800.595.6938 (phone) 202.706.5199 (fax) Dcstudentsupport@thechicagoschool.edu |
|--|---|---|--|---|

STUDENT NAME: _____ **STUDENT ID#:** _____

TCSP E-MAIL: _____ **PHONE#:** _____ **LOCATION:** _____

TERM/SEMESTER & YEAR: _____ **DEGREE LEVEL:** _____ **PROGRAM:** _____

ARE YOU AN INTERNATIONAL STUDENT? No Yes (if your enrollment drops below full time status, contact your DSO.)

ADD the following course(s) to my current registration (Departmental Approval Required)

| Program Prefix | Course # | Course section | Credits Hours | Course Title | Course Audit | Faculty Signature (Required only after Add/Drop deadline) |
|----------------|----------|----------------|---------------|--------------|--------------------------|---|
| | | | | | <input type="checkbox"/> | |
| | | | | | <input type="checkbox"/> | |
| | | | | | <input type="checkbox"/> | |
| | | | | | <input type="checkbox"/> | |

DEPARTMENT CHAIR SIGNATURE: _____ **DATE:** _____

DROP the following course(s) from my current registration

See the Academic Catalog & Student Handbook for details on financial implications of dropping courses after the Add/Drop deadline. If all courses are dropped, you will be administratively withdrawn from the institution. You are advised to consult with your academic department prior to submitting this request to your Student Support Counselor.

| Program Prefix | Course # | Course section | Credits | Program Prefix | Course # | Course section | Credits |
|----------------|----------|----------------|---------|----------------|----------|----------------|---------|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

STUDENT SIGNATURE: _____

DATE: _____

FOR OFFICE USE ONLY

| | | | | | | | |
|---|--|--|--|---|--|---|--|
| Date Recd/DOD: | | Date Processed: | | Drop Week: | | Reason: <input type="checkbox"/> schedule modification <input type="checkbox"/> Other | |
| Prev. CR Hrs: | | Curr. CR Hrs: | | Prev Status: <input type="checkbox"/> FT <input type="checkbox"/> HT <input type="checkbox"/> L <input type="checkbox"/> Other: | | Curr Status: <input type="checkbox"/> FT <input type="checkbox"/> HT <input type="checkbox"/> L <input type="checkbox"/> Other: | |
| U-Pass Status Update: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Initial: | | Add/Drop Fee: <input type="checkbox"/> Yes <input type="checkbox"/> No | | Fee Waived: <input type="checkbox"/> New Student <input type="checkbox"/> Other: | | Course(s) Unregistered: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | |
| Staff Processed: (Initial & Date) | | Financial Aid Processed: (Initial & Date) | | FA Adjustment Needed: <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| Student Account Processed: (Initial & Date) | | Refund %: | | Date Refund Issued: | | Comment: | |
| For International Student Only: | | | | | | | |
| DSO Processed: (Initial & Date) | | | | Comment: | | | |