

ADD / DROP / CHANGE REGISTRATION

University of Idaho

Registrar's Office
 PO Box 444260
 Moscow, ID 83844-4260
 Phone: (208) 885-6731
 Fax: (208) 885-9061
 www.uidaho.edu/registrar

Name _____ ID _____

Email _____ Phone _____

- | | | | | |
|---|-------------------------------------|---------------------------------|---------------------------------|-----------------|
| <input type="checkbox"/> Undergraduate* | <input type="checkbox"/> Law | <input type="checkbox"/> Fall | <input type="checkbox"/> Summer | 20 _____ |
| <input type="checkbox"/> Graduate | <input type="checkbox"/> Non-Degree | <input type="checkbox"/> Spring | <input type="checkbox"/> Winter | |

ADD		\$5 fee per form to add or drop after deadline				<i>*Advisor's signature required for Undergraduates</i>	
CRN	Subject	Course #	Section #	Credits	Title	Instructor's Signature	Advisor's Signature

DROP / WITHDRAW		\$5 fee per form to add or drop after deadline				<i>*Advisor's signature required for Undergraduates</i>	
CRN	Subject	Course #	Section #	Credits	Title	Advisor's Signature	

SECTION / LEVEL Change		CRN	Subject	Course #	Section #	Credits	Title	New Instructor's Signature
Current Class								
New Class								

Change to AUDIT	CRN	Subject	Course #	Section #	Instructor's Signature	Advisor's Signature

Change Class CREDITS	CRN	Subject	Course #	Section #	Current Credits	Requested Credits	Instructor's Signature

Semester Credit Overload	Approved Credit Total	Dean's Signature

Student's Signature _____	Date _____
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