NORTHWESTERN STATE

DROP / ADD CARD

_____ **CWID** _____

Last Name **First** **Middle**

Major _____ **Term:** Spring _____ Summer _____ Fall _____

Check the one that applies to you: Student Athlete _____ Scholars' College Student_____

Drop/Add (Circle One)		**Audit** (Circle One)		**Course & Number**	**Section Number**	**CRN Course Reference No.**	**Hours**	Check if this is a **Late Add**	Check if this is a **Late Drop**
D	A	D	A						
D	A	D	A						
D	A	D	A						
D	A	D	A						
D	A	D	A						

Student's Signature _____ **Today's Date** _____/_____/_____

Specify allowable reason(s) for submitting this request: Note: You must include dated documentation to support your request.

_____Illness ____Injury to Student ____Death of an Immediate Family Member ____Natural Disaster ____Exceptional Traumatic Event

Signatures required to request a late drop/add:

_____ Instructor of the course

_____ Student's Major Department Head

_____ Student's Major Academic Dean