

Date: \_\_\_\_\_

Effective Term: \_\_\_\_\_

### Hollins University Add/Drop Form

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M I: \_\_\_\_\_ Class Year: \_\_\_\_\_

Student ID: \_\_\_\_\_ HU Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**STUDENT SIGNATURE:** \_\_\_\_\_ (signature required in order to make changes)

Student Type: UNDERGRADUATE / HORIZON / VISITOR / SPECIAL/HS / GRADUATE

<b>A D D</b>	CRN	SUBJECT	NUMBER	SECTION	CR HRS	***SIGNATURE OF FACULTY***

**NOTES:**

- Signature of faculty required to add a closed course, waive a prerequisite, or for other course overrides.
- \*To enroll in more than 18 credits** students must secure the signature of their advisor before requesting approval from the dean of academic services.

\_\_\_\_\_ Printed Name of Advisor

\_\_\_\_\_ \*Advisor's Signature

\*By signing above you indicate that you approve of the overage amount. Enter total number of credits: \_\_\_\_\_

<b>D R O P</b>	CRN	SUBJECT	NUMBER	SECTION	CR HRS	***SIGNATURE OF FACULTY***

**NOTES:**

- Student must remain at 14 credits in order to be considered full time.
- Signature of faculty not required to drop a class before the last day to drop.

**For Academic Services Use:** Total Credits: \_\_\_\_\_ Overall GPA: \_\_\_\_\_ 18+ Before? \_\_\_\_\_ Incompletes? \_\_\_\_\_

Dean's Signature: \_\_\_\_\_ Date: \_\_\_\_\_