

PRIOR TERM ADD/DROP WORKSHEET

NAME:				STU	DENT ID:	
La	ast		First	M.I.		
E-MAIL AD	DDRESS:					
CHANGE(S	S) REQUEST	ED FOR:	YEAR FALL	SPRING SUMM	IER	
SIGNATURES:					DATE:	
			Student Signature	Type/Print Name		
Director		Director	of Graduate Studies Signature (If required)	Type/Print Name		
COURSE(S) TO ADD						
COURSE Prefix Number Section		r Section	INSTRUCTORS SIGNATURE To be completed by instructors only	INSTRUCTORS NAME (PRINT/TYPED)	FINAL LETTER GRADE	CREDIT HOURS
COURSE(S) TO DROP			JUSTIFICATION If dropping XXX-767, explain why the qualifying exam was delayed			
Prefix	COURSE Number	Section				
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NOTIFICATION: Fellowship recipients or TA/RA's must notify the Funding Office **immediately** of your change in registration (Gillis 203 or 257.3261). All students should check with the Student Billing Office regarding tuition and fee changes. The student is responsible for all tuition and fees related to prior term registration in 767 courses. Signing and submitting this form is acknowledgment of the student's financial responsibility.

SUBMISSION: Please email to your Academic Affairs Officer.

https://gradschool.uky.edu/academic-affairs-officers-0

02/17

Print Form

Reset Form