

**MISSISSIPPI COLLEGE
ADD FORM
(effective Fall 2012)**

*****MUST BE APPROVED BY DEPARTMENT CHAIR, DEAN, AND VICE PRESIDENT FOR ACADEMIC AFFAIRS
AFTER ADD OR DROP DEADLINE*****

For: Fall _____ Spring _____ Summer _____ Year _____

MC ID# _____ Last Name _____ First Name _____ Middle Name/Initial _____ Date _____

ADD COURSE*** Complete Course Information Must Be Provided

CRN #	DEPT	COURSE #	SEC	HRS	TIME	DAY	APPROVAL SIGNATURES
							INSTRUCTOR: _____ DEPT CHAIR: _____ DEAN: _____
							INSTRUCTOR: _____ DEPT CHAIR: _____ DEAN: _____
							INSTRUCTOR: _____ DEPT CHAIR: _____ DEAN: _____

Please provide an explanation for the requested action:

If international student, approval of the Office of Global Education: _____

FINAL APPROVAL OF VPAA: _____

TOTAL HOURS AFTER PROCESSING DROP/ADD _____. ADJUSTMENTS TO HOURS MAY AFFECT YOUR FINANCIAL AID AND/OR HOUSING. QUESTIONS SHOULD BE DIRECTED TO THE FINANCIAL AID/RESIDENCE LIFE OFFICES. I understand that, in changing my schedule without advisor consultation, I may delay completion of my degree.

Student Signature _____ Date _____

Processed by: _____ In the Office of the Registrar _____ Date _____

ANY CLAIMS FOR REFUNDS OF TUITION WILL BE BASED ON THE DATE ON WHICH THE STUDENT FILES THE REQUEST WITH THE OFFICE OF THE REGISTRAR.

ADD FEE: \$25.00 AFTER THE DEADLINE TO ADD COURSES

**MISSISSIPPI COLLEGE
DROP FORM
(effective Fall 2012)**

*****MUST BE APPROVED BY DEPARTMENT CHAIR, DEAN, AND VICE PRESIDENT FOR ACADEMIC AFFAIRS
AFTER ADD OR DROP DEADLINE*****

For: Fall _____ Spring _____ Summer _____ Year _____

MC ID# _____ Last Name _____ First Name _____ Middle Name/Initial _____ Date _____

DROP COURSE*** Complete Course Information Must Be Provided

CRN #	DEPT	COURSE #	SEC	HRS	TIME	DAY	APPROVAL SIGNATURES
							INSTRUCTOR: _____ DEPT CHAIR: _____ DEAN: _____
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DROP FEE: \$25.00 AFTER THE DEADLINE TO DROP COURSES