



Office of the Registrar  
 118 E. South Street | Raleigh, NC 27601  
 Debnam Hall 2<sup>nd</sup> Floor  
 Tel: 919-546-8414 Fax: 919-546-8553

## ADD-DROP FORM

Semester/Year \_\_\_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Student ID# \_\_\_\_\_

ShawU Email \_\_\_\_\_ Today's Date \_\_\_\_\_ Telephone# \_\_\_\_\_

**ADD**

DEPT/COURSE#/ Section	Credits	Instructor/Dept. Chair Signature/Date
DEPT/COURSE#/ Section	Credits	Instructor/ Dept. Chair Signature/Date
DEPT/COURSE#/ Section	Credits	Instructor/ Dept. Signature/Date
DEPT/COURSE#/ Section	Credits	Instructor/ Dept. Signature/Date

**DROP/WITHDRAW**

DEPT/Course # / Section	Credits	Instructor Signature/Date
DEPT/Course # / Section	Credits	Instructor Signature/Date
DEPT/Course # / Section	Credits	Instructor Signature/Date
DEPT/Course # / Section	Credits	Instructor Signature/Date

Completed Forms emailed to registrar@shawu.edu for processing.

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

Advisor's Signature \_\_\_\_\_ Date \_\_\_\_\_

Department Chair  
 Signature **(Required  
 to override  
 prerequisite)** \_\_\_\_\_ Date \_\_\_\_\_

**UPLOAD REQUIRED DOCUMENTS**

Registration and Grade Request Checklist