Year: _____



Semester: Fall Spring Summer I Summer II

			Student Banner ID:	
First Name	Full Middle Name	Last Name		
			Phone Number:	
This is a petition to:				
ADD		ld courses after day 5 of s a permit or override.	the fall/spring semester (da	ay 2 summer term) or to add
DRO	Use this form ONL\ linked course (drop	pping a lab or lecture on	ent's AppalNet account. ring semester (day 2 summe ly) OR when switching section e same discipline (dropping	ons due to an administrative
FOR LATE DROPS (af	fter week 9) OR EXTRA D	ROPS USE THE <u>REQUI</u>	EST FOR EXCEPTION TO D	PROP POLICY FORM.
	Course Department*		Course Number	Section Number
Extenuating reason for d	rop or add:			
Signatures must be obta	ained in the order listed:			
5.6				
4)				
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Student – Signature		 Date	 obtaining department chair's s	ignature.
Student – Signature This form must be subm	itted to the Dean's Office with	Date nin TWO business days of o	 obtaining department chair's s	ignature.
Student – Signature This form must be subm 2)	itted to the Dean's Office with	Date nin TWO business days of o		
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