



Spring     Summer     Fall    20\_\_

**BOX A - Demographic Information**

NAME	ID #
ADDRESS	
CITY, ST ZIP	
PHONE NUMBER	

BOX C - Adds	COURSE NUMBER & PREFIX	SECTION	COURSE TITLE	CREDIT HOURS	CAP

*ONLY NECESSARY IF PERFORMING A SECTION CAP OVERRIDE*

**Approving Signature for Section Cap Override**  
(PLEASE CHECK THE "CAP" BOX FOR THESE COURSES)

**BOX B - Approving Signatures**

STUDENT	DATE
ADVISOR	DATE
FINANCIAL AID	DATE
REGISTRAR	DATE

**NOTE:** ALL Financial Aid Recipients **MUST** have this form signed by the Financial Aid Office before submission to the Registrar's Office for processing.

BOX D - Drops	COURSE NUMBER & PREFIX	SECTION	COURSE TITLE	CREDIT HOURS

**BOX E - Credit Hour Change**

CREDITS BEFORE CHANGE		CREDITS AFTER CHANGE	
-----------------------	--	----------------------	--