

## University of Dubuque – Schedule Change Form (Add/Drop/Withdrawal)

**Add, drop, and withdrawal dates are found on the Academic Calendar. Form must be received in the Registrar's Office by end of day on date noted on Academic Calendar. If Registrar's Office staff cannot decipher signatures, form will not be accepted!**

**Option A – MyUD – Preferred Method for Adds/Drops** – Not available if instructor or other approval is needed. See box below. Not available for Withdrawals.

1. Log into MyUD > Students tab > Course Schedules > Add/Drop Courses. Make sure correct term is selected.
2. To Add a course: locate the desired course using Course Search, check the 'Add' box, Click Add Course(s).
3. To Drop a course: locate course in 'Your Schedule' on bottom of page, check the 'Drop' box, Click Drop Course(s).
4. Check your schedule to ensure accuracy.

**Option B – Paper Submission – Required Method for Withdrawals (and Adds/Drops if Option A is not applicable)**

1. Student prints and completes form clearly.
2. Obtain signatures as needed in the order on this form. See box below to verify whether you will need to get the instructor's or other approval.
3. Submit completed form to Registrar's Office, MTAC 325.

### Instructor or other approval needed for the following:

- Adding a course needing instructor approval to override any of the following:
  - Full Course
  - Time Conflict
  - Missing Pre-Requisite or Co-Requisite
  - Course needing instructor approval
- Adding a course after the online add/drop period is closed – instructor approval required
- UG course load exceeds 19 credits – Associate Dean for UG Studies approval is required (Severance 119)

**\*\*Form on back MUST be submitted to the Registrar's Office within 24 hours of any required Instructor and/or Advisor signatures.\*\***

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University of Dubuque – Schedule Change Form (Add/Drop/Withdrawal) – [Instructions on back]

Name (Last, First Middle) \_\_\_\_\_ ID # \_\_\_\_\_

Semester:     Fall                     J-Term                     Spring                     Summer                    Year: \_\_\_\_\_

| Action (CIRCLE ONE) | Full Course Code (ex: ENG 101-02) | Credits | Instructor |
|---------------------|-----------------------------------|---------|------------|
| DROP/WITHDRAWAL     |                                   |         |            |
| DROP/WITHDRAWAL     |                                   |         |            |
| DROP/WITHDRAWAL     |                                   |         |            |
| DROP/WITHDRAWAL     |                                   |         |            |

| Action | Full Course Code (ex: ENG 101-02) | Credits | Override (if needed)  | Instructor Printed Name, Signature, & Date (required for any override) |
|--------|-----------------------------------|---------|---|--|
| ADD    |                                   |         | <input type="checkbox"/> Time Conflict <input type="checkbox"/> Full Class<br><input type="checkbox"/> Instructor Appr <input type="checkbox"/> Pre-Req |  |
| ADD    |                                   |         | <input type="checkbox"/> Time Conflict <input type="checkbox"/> Full Class<br><input type="checkbox"/> Instructor Appr <input type="checkbox"/> Pre-Req |  |
| ADD    |                                   |         | <input type="checkbox"/> Time Conflict <input type="checkbox"/> Full Class<br><input type="checkbox"/> Instructor Appr <input type="checkbox"/> Pre-Req |  |
| ADD    |                                   |         | <input type="checkbox"/> Time Conflict <input type="checkbox"/> Full Class<br><input type="checkbox"/> Instructor Appr <input type="checkbox"/> Pre-Req |  |

ADVISOR Printed Name \_\_\_\_\_ Date \_\_\_\_\_

& Signature \_\_\_\_\_ Time \_\_\_\_\_

My signature acknowledges that I have reviewed and approved this schedule change. (Required for Adds/Drops once term starts and all Withdrawals.)

Director of International Student Services Signature \_\_\_\_\_ Date \_\_\_\_\_

(Required for all international students.)

STUDENT ACCOUNTS Signature \_\_\_\_\_ Date \_\_\_\_\_  No AR Hold **OR**  AR Hold Removed

STUDENT Signature \_\_\_\_\_ Date \_\_\_\_\_

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| DROP/WITHDRAWAL     |                                   |         |            |
| DROP/WITHDRAWAL     |                                   |         |            |
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| DROP/WITHDRAWAL     |                                   |         |            |

| Action | Full Course Code (ex: ENG 101-02) | Credits | Override (if needed)  | Instructor Printed Name, Signature, & Date (required for any override) |
|--------|-----------------------------------|---------|---|--|
| ADD    |                                   |         | <input type="checkbox"/> Time Conflict <input type="checkbox"/> Full Class<br><input type="checkbox"/> Instructor Appr <input type="checkbox"/> Pre-Req |  |
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| ADD    |                                   |         | <input type="checkbox"/> Time Conflict <input type="checkbox"/> Full Class<br><input type="checkbox"/> Instructor Appr <input type="checkbox"/> Pre-Req |  |
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& Signature \_\_\_\_\_ Time \_\_\_\_\_

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