



University Hospital at Downstate
College of Nursing
School of Health Professions
School of Public Health

Office of the Registrar

450 Clarkson Avenue, MSC
98 Brooklyn, New York 11203
Telephone: 718-270-4551
Fax: 718-270-7592

COURSE ADD/DROP FORM

Instructions to the Student: Use this form to make changes to your class schedule – dropping or adding courses after the add/drop period or courses that require permission to enroll (see Student Handbook). The date the completed form is received in the Office of the Registrar is the date used to determine late fees and financial liability (see Student Handbook). All transactions require the approval of the course director AND the program designee. Withdrawals prior to 1/3 of the term is completed, requires the course instructor to indicate whether the student is to receive a grade of Withdrew (W). Withdrawals after the 1/3 but prior to 2/3 of the term is completed, requires the course instructor to indicate whether the student is to receive a grade of Withdrew/Passing (WP), or Withdrew/Failing (WF).

Print or Write Clearly

This term: Fall Spring Summer 20

- Your name
- Last First Middle
- Student ID # College: ☐ SOHP ☐ Grad. Nursing ☐ Nursing ☐ Public Health
- Indicate total number of credits you are registered for **BEFORE** this change:

COURSE(S) ADDED

CRN Number (required)	Dept Name & Course # (e.g. PHY-B 32010)	Course Title (e.g. Physiology & Biochemistry)	Section	Credits	Instructor's Signature
TOTAL CREDITS ADDED					

COURSE(S) DROPPED*

COURSE(S) DROPPED						
CRN Number (required)	Dept Name & Course # (e.g. PHY-B 32010)	Course Title (e.g. Physiology & Biochemistry)	Section	Credits	Grade * (W, WP, WF)	Instructor's Signature
TOTAL CREDITS DROPPED						
* Courses can only be dropped during the add/drop period. After this period, a student must Withdraw from the course. See Student Handbook for withdrawal policies. W= Official Withdrawal before the midsemester WP= Official Withdrawal after the midsemester while passing the course WF= Official Withdrawal after the midsemester while failing the course						

Indicate total number of credits you are registered for **AFTER** all the above changes.

Student Signature _____ Date _____

Program/Dean's Approval _____ Date _____

FOR OFFICE OF THE REGISTRAR USE ONLY

Entered in Student Database _____ Staff Initials _____

Date _____