## Change of Course Request

### Undergraduate Students

**Commodore Student ID:**

**Student Name:**

**Student Home School:**

**Term/Year (e.g., Fall 14):**

<table>
<thead>
<tr>
<th>SUBJECT AREA</th>
<th>COURSE NUMBER</th>
<th>SECTION</th>
<th>YES CLASS NUMBER</th>
<th>Day/Time</th>
<th>INSTRUCTOR APPROVAL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Required after 10th day of class. Attach written/email communication as appropriate.</td>
</tr>
</tbody>
</table>

**Will dropping any above course(s) leave you below 12 credit hours?**

<table>
<thead>
<tr>
<th>Y / N</th>
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</table>

**Are you planning to graduate this semester or next?**

<table>
<thead>
<tr>
<th>Y / N</th>
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</thead>
</table>

**Are you now, or have you ever been on academic probation?**

<table>
<thead>
<tr>
<th>Y / N</th>
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</table>

**Are you taking a graded course “Pass/Fail” other than that which you are dropping?**

<table>
<thead>
<tr>
<th>Y / N</th>
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</table>

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**NOTE:**

- Effective date is the date form is received by the home school Office of Academic Services.
- If you answered YES to any question above, dean’s approval is required. Courses dropped after the deadline to “drop with no entry on the record” will be entered on the student’s record with a grade of W. No course can be dropped after the published deadline for withdrawal.

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### ADD / EDIT

<table>
<thead>
<tr>
<th>SUBJECT AREA</th>
<th>COURSE NUMBER</th>
<th>SECT.</th>
<th>YES CLASS NUMBER</th>
<th>Day/Time</th>
<th>Will this add put you above 18 hours? Y/N</th>
<th>Request For Audit? Y/N**</th>
<th>Request for Pass/Fail grade basis in a typically graded course? Y/N***</th>
<th>INSTRUCTOR APPROVAL</th>
</tr>
</thead>
<tbody>
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**If you answered YES to any question above, dean’s approval is required. Courses dropped after the deadline to “drop with no entry on the record” will be entered on the student’s record with a grade of W. No course can be dropped after the published deadline for withdrawal.**

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**NOTE:**

- Certain courses are not eligible to audit. No permanent record is kept of audited courses.
- Must meet pass/fail eligibility requirements.

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**Adviser’s PRINTED NAME & Signature**

Date

**Math DUS approval**

(Required for changing sections of or adding Math courses.)

Date

**Student’s Signature**

Date

**Advising Dean’s approval (if necessary)**

Date

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*Updated 08192014 Office of the University Registrar*