

CONFIDENTIAL

Graduate Course Add or Drop/Withdrawal Form

TODAY'S DATE: _			TERM:	FALL	☐ WINTE	₹ _	SPRING	3 <u></u>	SUMME	R					
PROGRAM:	EDD CAG	GS MA	МАТ	МВА	MED	N	ИS	□ от	HER						
LASTNAME						FIRST	NAME	•						МІ	
STUDENTID NUM	BER (CURRENT ST	OR SOCIA	AL SECURITY NUI	MBER											
MAILING ADDRES	is			CITY/TOW	/N					STA	TE		ZIP		
HOME PHONE WITH AREA CODE WORK PHONE WITH AREA CODE EXT.										CELL PHONE WITH AREA CODE					
PERSONAL E-MAIL BUSINESS E-MAIL															
STUDENT SIGNATURE									DATE						
ADD															
COURSE DEPT	COURSE NUMBER		(COURSE TITL!	<u> </u>				CRN		CR	COU	RSE CHAR	RGE	
PLEASE NOTE: Instructor's permission is required to add a course that has already begun.									TOTAL DUE						
DROP/WITHE															
COURSE DEPT	COURSE NUMBER		(COURSE TITLI	E				CRN		CR	COL	IRSE CHAR	RGE	
PLEASE NOTE: Final refund/total due will be determined by the <u>Course Drop/Withdrawal Schedule</u> . The \$25 drop fee is charged at the time of the drop. Please consult your online bill through your myPlymouth									DROP FEE				-25.00		
account to view and process any refunds. Refunds will be credited via the same method/account with which payment was made.								R	REFUND/TOTAL DUE						
PLEASE INDICATI	E REASON(S) FOR I	DROPPING THE CO	OURSE:									OFFI	CE USE C	NLY	
		PAYMENTI	NFORMATIO	ON WILL	NOT BE	ACCE	PTED V	/IA EM	AIL						
PAYMENT INFOR		DIT CARD ACCOU	NIT												
NAME AS IT APPEARS ON BANK/CREDIT CARD ACCOUNT (PLEASE PRINT) ACCOUNT HOLDER SIGNATURE									E-CHECK/CHARGE AMOUNT						
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ENCLOSED IS MY	CHECK FOR \$	(PA)	YABLE TO PSU) *	VETE	ERAN'S AFFA	IRS BEN	EFITS **	□отн	IER SPECI	IFY					
CHECK WILL NOT	NON-REFUNDABL BE ASSESSED A SI NT@PLYMOUTH.E	ERVICE CHARGE.	ERVICE CHARGE CONTACT STUDE	WILL BE AS ENT ACCOUI	SESSED ON NT SERVICE:	ALL CRE S FOR M	DIT/DEBI ORE INFO	IT CARD	TRANSA ON AT TOI	CTION: LL FRE	S. PAYM E (8 ₇₇) 8	ENTS MA 46-5755 C	DE VIA E R E-MAII	E- L PSU-	
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E-CHECK***	BANK ROUTING N	IUMBER	BAN	NK ACCOUN	TNUMBER										
VISA MC		REDIT CARD ACCO	UNT NUMBER					EXPI	RATION	DATF		CCV2 CO	DE		
	Civ	3 = 7.000						_,,,,	RATION (MMYY)		(3	CCV2 COI OR 4 DIG	iTS)		

^{*} Returned checks will be assessed a fee.

^{**} Students receiving Department of Veterans Affairs benefits under the Montgomery GI Bill are limited to an add/drop period that does not exceed thirty (30) days [38CFR21.420(1)]