



Plymouth State University
of the University System of New Hampshire
Office of the Registrar
17 High St, MSC #7
Plymouth, NH 03264
Phone: (603) 535-2345

LATE ADD Form

For use by Full-time

Date:	
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Name: <i>(please print or type)</i>				Student ID:									
Last:		First:		M.I.									

Course(s) to be **ADDED**:

CRN	Course ID	Title	Cr.	Signature of Instructor	Date

Student Signature: _____ Date: _____

Note

All Late Adds will be subject to a \$50 late fee per course to be paid at the time of Late Add.