INDIVIDUAL COURSE CHANGES (Please use black ink)

This form is to be used to drop & add INDIVIDUAL courses. **THE STUDENT IS RESPONSIBLE** TO SEE THAT THE FORM, COMPLETE WITH REQUIRED SIGNATURES, IS FILED WITH THE ENROLLMENT SERVICES OFFICE, 2nd Floor KIRKWOOD HALL.

Changes are not official, nor refunds authorized, until completed form is received in that office.

TUITION REFUND SCHEDULE

Through 1st week of term. 100%

Through 2nd week of term . . . . . .50% *

The exceptions to this policy are classes that meet 8 days or less. There is no refund for these classes beginning the day of the first class meeting. ***Refunds will be mailed after the 3rd week of the session.***

* You can drop a course and add back an equal number of hours without penalty through the 14th day of the semester for full semester classes.

Required Signatures:

- **Course changes through the 1st week of a 16-week semester *and through the 3rd day* of shorter sessions:**
  DROP: no signature ; **ADD:** no signature unless class is full. If full, instructor and dean signatures are required.
- **Course changes starting the 2nd week of a 16-week semester *and starting the 4th day* of shorter sessions**:
  DROP: no signature**; ADD:** instructor *and* dean
- **Signature and note of Approval of Dean is required for OVERLOAD (19 credits or more)**

For Dean's Signature:

Agriculture, Horticulture, Floriculture - Washington Hall
AT/AW - 210 Linn Hall
Business, Computer Education, Food Service – 203 Nielsen Hall
English, Literature – 3051 Cedar Hall
Health Science - 223 Linn Hall
Humanities, Speech, Foreign Language, Religion – 336 Cedar Hall
Industrial Technologies – 103 Jones Hall
Iowa City Center - all Iowa City courses
KTS/ICN - 214 Linn Hall
Learning Services, Communication Skills – 2063 Cedar Hall
Math, Science, Engineering, Physical Education - 240 Linn Hall
Off-campus sites – County/Resource Center/Marion site
Social Science, History, Career Option- 1008 Cedar Hall
Student Development, Human Potential - 115 Iowa Hall

_____ _____

Name: Last (PLEASE PRINT) **First** **Middle** **Student I.D. Number**

_____ _____ _____ _____

Term **Year** **Academic Program** **Student Phone Number**

Add	Drop	Synonym #	Course/Section #	Start Date	Cr Hrs	Section Title	Instructor's Signature & Date	Dean's Signature & Date
___	___	_____	_____	_____	____	_____	_____	_____
___	___	_____	_____	_____	____	_____	_____	_____
___	___	_____	_____	_____	____	_____	_____	_____
___	___	_____	_____	_____	____	_____	_____	_____

International Student Advisor (if applicable) _____

International Students: Any changes require the signature of the International Student Advisor, 134 Linn Hall

I request and accept responsibility for the above changes to my schedule and education program.

_____ _____

Student Signature **Date**

Office Use Only
Date Received _____ ***By***_____

Revised: 01/30/09