

Mount St. Joseph University ADD/DROP FORM

Please refer to the [Semester Policies and Procedures](#) for full Add/Drop information.

Print Name: _____ ID# _____

(Last) (First)

Student Signature _____ Date: _____

Semester/Year _____ Advisor's Name: _____ Major: _____

ADD THE FOLLOWING COURSES:

The student is responsible for submitting this form to the Conlan Center or emailing the form to Financial.Aid@msj.edu

****Instructor signature required after the course begins. 16 week courses cannot be added after the 9th calendar day of the semester.**

| Subject | Course # | Section | Course Title | Hrs | P/F or Audit? | Instructor Signature (OR Department Chair) | Advisor Signature |
|---------|----------|---------|--------------|-----|---------------|--|-------------------|
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DROP THE FOLLOWING COURSES:

The student is responsible for submitting this form to the Conlan Center or emailing the form to Financial.Aid@msj.edu

****Dropping courses may impact your financial aid, student bill, athletic eligibility, and your progress towards graduation. The final responsibility for meeting program degree requirements and being informed of University regulations and procedures rests with the student.**

| Subject | Course # | Section | Course Title | Hrs | Advisor Signature |
|---------|----------|---------|--------------|-----|-------------------|
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| <p>Internal Use Only: Processed by: _____ Date: _____ Effective date: _____</p> <p>If required: APAS signature _____ Date: _____</p> |
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***The add/drop request is not effective until submitted to Student Administrative Services**