

Request to Change the Registration Status of a Course

Name:

Course Number:

Title of Course:

Change of registration requested (e.g. add, drop, etc.):

Short reason why you want to change your registration status for this course:

Requested by:

\_\_\_\_\_  
Student signature

\_\_\_\_\_  
Date

Approved by:

\_\_\_\_\_  
Advisors signature

\_\_\_\_\_  
Director, Chemistry  
Graduate Program