



REGISTRATION AND ADD/DROP FORM

Revised September 2018

This form is to be used for all registration and schedule changes. A separate form must be used for each academic term. Please visit http://schedule.wvstateu.edu/ to review available courses, times, and locations.

Name: _____ ID No.: A00 _____

Major: _____ Term: Fall _____ Spring _____ Summer _____

Initial Registration

Change of Schedule

16-Week

1st 8-Week

2nd 8-Week

| CRN | Department | Course Number | Section | Credits | Dean's Override Initials (if needed) |
|---------------------|------------|---------------|---------|---------|--------------------------------------|
| Courses to be ADDED | | | | | |
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|-----------------------|--|--|--|--|--|
| Courses to be DROPPED | | | | | |
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Notes:

Empty box for notes

Student Signature: _____ Date: _____

Advisor Signature: _____ Date: _____

PIN: _____ Registration Date: _____