

**KUYPER COLLEGE
DROP/ADD/WITHDRAWAL FORM**

Student's Name _____
Date _____

I hereby request permission to: drop _____

add _____

Withdraw as a student at, effective date _____

Signature _____

___Fr. ___Resident
___Soph. ___Non-resident
___Jr. ___Full-time
___Sr. ___Part-time
___Sp. ___Credits after transaction

Initial Date
1. Financial Aid Office approval: _____
2. Student Life Office approval: _____
3. Academic Office approval: _____
4. Business Office approval: _____

The student begins this process by coming to the Academic Office, filling in this form, getting the instructor's signature, Financial Aid, Student Life, Academic Office, and Business Office signatures. Return your form to the Academic Office.

The effective drop date will be the date the Registrar authorizes.

See other side for faculty authorization and approval.

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See other side for faculty authorization and approval.

_____ Name of Student

has my approval to withdraw from: _____

add: _____

reason(s) _____

Faculty member's signature _____

date _____

_____ Name of Student

has my approval to withdraw from: _____

add: _____

reason(s) _____

Faculty member's signature _____

date _____