

수강 변경 신청서

CHANGE OF REGISTRATION FORM

*Please consult the Academic Catalog for information on adding / dropping courses, deadlines, and how changes in registration may affect your tuition bill.

학생 정보 / STUDENT INFORMATION

| | | | | |
|------------------------------|---|------------|----------------------------|-----------|
| Student's Last Name: | Middle | First Name | Today's Date: | |
| Street address: | P.O.Box: | City: | State: | ZIP Code: |
| E-mail: | | Phone: | Degree Program: (현재 과정) | |
| Check All That Apply: | | | | |
| <input type="checkbox"/> | I am dropping and adding the following classes. | | | |
| <input type="checkbox"/> | I am dropping the following classes. | | | |
| <input type="checkbox"/> | I am adding the following classes. | | | |

*If you are dropping all your classes, you do not need to complete the chart

| Add | Drop | Semester/학기 | Course/과목번호 | Section/지역번호 | Class Name / 과목명 | Credit/학점 |
|-----|------|-------------|-------------|--------------|------------------|-----------|
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Reason(s) for change (이유): _____

ACKNOWLEDGEMENT: I am aware of the policies regarding changes in registration and understand the academic and/or financial implications of my requested changes.

Student's Signature: _____ Date: _____

FOR OFFICE USE ONLY (학교 사무실 전용)

| | | | |
|--|---|-----------------------|--|
| Registrar's Signature: | | Official Change Date: | |
| Fee Refund: <input type="checkbox"/> Yes <input type="checkbox"/> No | Full Tuition Refund: <input type="checkbox"/> Yes <input type="checkbox"/> No | Current Credit Hours: | |
| Charge for Contact Hours: | | | |
| Populi: | Moodle: | Business Office: | |