



# COURSE ADD & DROP FORM

DIN: RUW-OR/REG-T-010

RN: 02

ED: 05/11/2018

Student's Name: \_\_\_\_\_ College: \_\_\_\_\_ AY: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Student's I.D. No.: \_\_\_\_\_ Degree: \_\_\_\_\_ Semester:  1ST  2ND  SUMMER

Registration Date: \_\_\_\_\_ Curriculum: \_\_\_\_\_ Year:  1ST  2ND  3RD  4TH

ADD				DROP				FEES
Course code	Section	Course title	Credits	Course code	Section	Course title	Credits	

Sponsor Name: \_\_\_\_\_  Full  Part  Other (Specify) \_\_\_\_\_

Paid Fee: Registration: \_\_\_\_\_ Tuition: \_\_\_\_\_

**Student:**

\_\_\_\_\_  
Name (print)

\_\_\_\_\_  
Signature

\_\_\_\_\_/\_\_\_\_/20  
Date (dd/mm/yyyy)

**College Advisor:**

\_\_\_\_\_  
Name (print)

\_\_\_\_\_  
Signature

\_\_\_\_\_/\_\_\_\_/20  
Date (dd/mm/yyyy)

**Finance Officer:**

\_\_\_\_\_  
Name (print)

\_\_\_\_\_  
Signature

\_\_\_\_\_/\_\_\_\_/20  
Date (dd/mm/yyyy)

**Registrar:**

\_\_\_\_\_  
Name (print)

\_\_\_\_\_  
Signature

\_\_\_\_\_/\_\_\_\_/20  
Date (dd/mm/yyyy)

Exceptional Reason : \_\_\_\_\_

Higher Approval (If Applicable) : DEAN : \_\_\_\_\_ Date : \_\_\_\_\_ AVP : \_\_\_\_\_ Date : \_\_\_\_\_