ADD/DROP REQUEST



Office of Records & Registration 500 Hawk Drive, New Paltz, NY 12561-2439

REGISTRATIO	N FOR	: 🗌 f	Fall		Win	ter [□S	pring Summer 20 CHECK ONE: Undergraduate Graduate
INFORMA Students ar my.newpaltz	e enco							o schedules in My Schedule Planner without the need to submit any forms. Go to ule Planner.
This form is not possible							mitt	ed directly to the Office of Records and Registration when online registration is
To confirr	uctor o n, go t	or chai o <i>my.r</i>	r ha new _l	s en paltz	itere z.edu	ed all u > F	appl Regis	he advisor icable permissions electronically prior to submitting this form. tration > Permissions c Calendar for all dates and deadlines.
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Last Name			First		MI Student ID Number			
Campus E-ma	uil							
INSTRUCT	TION:	6						
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CRN COURSI).			SEC.	NO.	COURSE TITLE
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CRN	COURSE NO.					SEC. NO		COURSE TITLE
also apply.	ın affe	ct tuit	ion l		Ü			(type your name) acknowledge that changes to the class owledge that course change fees and tuition liability for schedule changes may SHOULD CHECK WITH STUDENT FINANCIAL SERVICES OFFICE,

WOOSTER HALL 124, IF THE TOTAL CREDITS AFTER CHANGES EQUAL LESS THAN FULL TIME.

If you are an EOP represented student, please have the completed form submitted by your EOP advisor.

Submit this completed form to Records & Registration, WH 115 or recreg@newpaltz.edu from your college e-mail address.

7/21 • 38-009