

BAYLOR UNIVERSITY

Which term are you requesting the change?

Year

Summer

Fall

Spring

Add/Drop and Registration Form

Office of the Registrar

One Bear Place #97068

Waco, TX 76798-7068

Registrar@baylor.edu

Phone (254) 710-1181 Fax (254) 710-2233



Name: _____ Date: _____
Last First Middle

Baylor ID: _____ Phone: _____

Degree: _____ Major: _____ Classification: _____

ACTION		CRN	COURSE PREFIX	COURSE NUMBER	SECTION	HOURS
ADD	DROP					
<input type="radio"/>	<input type="radio"/>					
<input type="radio"/>	<input type="radio"/>					
<input type="radio"/>	<input type="radio"/>					
<input type="radio"/>	<input type="radio"/>					
<input type="radio"/>	<input type="radio"/>					
<input type="radio"/>	<input type="radio"/>					
<input type="radio"/>	<input type="radio"/>					
<input type="radio"/>	<input type="radio"/>					

*Professional Advisor's signature is **required** within specific dates each semester during the 'W' drop period. For a complete list of dates please visit: www.baylor.edu/registrar/dropdates

Student's Signature (required): _____ **Date:** _____

I have read and understood the 'before you drop a class' guidelines located at www.baylor.edu/advising/b4udrop

Professional Advisor's Signature: _____ **Date:** _____
(required during 'W' period only*)

For Professional Advisors office locations please visit www.baylor.edu/advising/add_drop_signatures

For Dean's Office Use Only

If applicable, to waive the 'Add/Drop' fee, please check the box and sign below.

For Office of the Registrar Use Only

Petition on File:

Overload Pass/Fail Grad. Level

Audit Repeat C Misc.

Completed By: