

Submit this form by email attachment to registrar@augsburg.edu, fax to 612-330-1425, or in person at the Enrollment Center window.

Name _____ Student ID # _____
Last, First, Middle Initial

Augsburg Email Address _____@augsburg.edu Phone (____) _____ - _____

By signing below you are accepting all **financial and academic obligations** incurred as a result of this transaction. Full policy details can be found online at www.augsburg.edu/studentfinancial/disclosure.

Student Signature (Required) _____ Date (Required) _____

ADD for the following year & term (circle one): 20__ - 20__ Fall Spring Summer I Summer II Summer III

Course & Section (Ex: HIS 101-A)	Course Program (DAY, WEC, ROCH)	Credit (0, .25, .5, 1)	Grade Option * (T, P/N or V)	Title

* Grade Options: T = Traditional Grade, P/N = Pass/No Pass, V = Audit (needs faculty signature). There are limits to how many P/N courses students can take. Please review the policies in the catalog for more information (www.augsburg.edu/catalog), or speak with Academic Advising.

Please remove from my schedule **
DROP for the following year & term (circle one): 20__ - 20__ Fall Spring Summer I Summer II Summer III

Course & Section (Ex: HIS 101-A)	Course Program (DAY, WEC, ROCH)	Credit (0, .25, .5, 1)	Title

** Changing your credit load can affect your financial aid. Please contact Student Financial Services at studentfinances@augsburg.edu or 612-330-1046 if you have questions.

Faculty Approval

I waive the prerequisite(s) for the following course _____ This student may join my course _____

Faculty Printed Name _____ Faculty Signature _____

OFFICE USE ONLY
 Entered By _____ Date _____