



Office of the Registrar

Processor	_____
Term	_____
Date	_____

## Course Registration: Add, Drop or Withdraw

Student ID Number         Trimester \_\_\_\_\_ Year \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ M.I. \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_

Select your action in each box. Dropping or withdrawing from a class may impact your financial aid, VA education benefits, F1 visa status, and result in a balance. Students should consult with the appropriate office(s) before dropping or withdrawing.

- The **Office of Financial Aid** can be contacted at [financialaid@muih.edu](mailto:financialaid@muih.edu) or (410) 888-9048 ext. 6628 to verify the impact of course changes.
- Students using **VA Education Benefits** can contact [veteransaffairs@muih.edu](mailto:veteransaffairs@muih.edu) or (410) 888-9048 ext. 6620.
- **Students not using any of the above**, but paying out of pocket should contact the Finance Office [studentaccounts@muih.edu](mailto:studentaccounts@muih.edu) or (410) 888-9048 ext. 6684

Action	Course Number (ex. NUTR 600)	Section (ex. 200)	Credit Hours
<input type="checkbox"/> Add <input type="checkbox"/> Drop <input type="checkbox"/> Withdraw			
<input type="checkbox"/> Add <input type="checkbox"/> Drop <input type="checkbox"/> Withdraw			
<input type="checkbox"/> Add <input type="checkbox"/> Drop <input type="checkbox"/> Withdraw			
<input type="checkbox"/> Add <input type="checkbox"/> Drop <input type="checkbox"/> Withdraw			

**Are you dropping or withdrawing due to COVID-19?**  Yes  No

### Financial Terms and Conditions

By checking here I understand that by dropping or withdrawing from a course there could be financial implications. I have contacted the Financial Aid Office ([financialaid@muih.edu](mailto:financialaid@muih.edu)) or the Finance Office ([studentaccounts@muih.edu](mailto:studentaccounts@muih.edu)) to discuss my financial obligations.

Please review the [Course Withdrawal](#) Policy as well as the [Refund Policy](#) prior to submitting this form.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Academic Advisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*The signature of an academic advisor is only required for **course withdrawals** (not adding or dropping).*

The signature of a department chair will be required for courses added past the schedule adjustment deadline.