



**Registrar's Office**  
 400 St. Bernardine Street  
 Reading, Pa. 19607  
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 610-796-8201  
[RegistrarsOffice@Alvernia.edu](mailto:RegistrarsOffice@Alvernia.edu)

## Course Add/Drop/Withdrawal Form – Graduate and Adult Education

This form is to be used for course withdrawals within the term, and not for withdrawing from the university. Students must review the University Refund Policy prior to completing this form. Term withdrawal deadlines vary by term and are posted on the Academic Calendar as “Last Day to withdraw without ‘F’.” Questions about financial aid, billing, etc., should be directed to Student Financial Services at [SFS@alvernia.edu](mailto:SFS@alvernia.edu).

### STUDENT INFORMATION

First	Middle	Last
Student ID Number	Year	Term

### COURSE WITHDRAWAL INFORMATION

Are you removing your entire schedule for the term (including MODS)?      **Yes**      **No**

**If yes**, are you planning to return?      Yes      No

**If yes**, intended term/year of return: \_\_\_\_\_

Reason:    Medical Leave    Financial    Personal    Other

If you are not planning to return, please provide reason for university withdrawal (attach documentation, if necessary):  
 \_\_\_\_\_

**If no**, please complete the grid below.

All information in table below is required for processing. List one course per line.

Check one			Course Name & Number (e.g. BUS 200)	Section	Course Title
Add	Drop	Withdraw			

### STUDENT ACKNOWLEDGEMENT

*I acknowledge and accept the charges that may be incurred by this schedule change request, and I have read and understand the applicable policies in the [catalog](#).*

*I understand that if I am receiving financial aid, I must immediately notify the SFS office of any schedule changes. Lack of communication may result in cancellation or termination of my financial aid.*

Student Signature	Date
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