

**SCHEDULE CHANGE FORM**

WASHBURN UNIVERSITY SCHOOL OF LAW

\_\_\_\_ Fall, \_\_\_\_ Spring, \_\_\_\_ Summer, 20 \_\_\_\_

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

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Phone \_\_\_\_\_

Dept.	Crse #	Sect	CRN	Course Title	Sem. Hrs.	Grade/Audit	Time	Days of week	Instructor's Signature or Dean's Signature
DROP*									

\*Dropping below full-time enrollment status may adversely affect your eligibility for scholarships and for certain private insurances. Dropping below 6 hours will adversely affect your eligibility for Federal Financial Aid. Please contact the Financial Aid Office in Morgan 267 for specific information.

ADD									

**IMPORTANT NOTES**

**TOAL HOURS AFTER CHANGE** \_\_\_\_\_

1. See class schedule for deadlines/procedures for dropping or adding a class.
2. Any time a class is added or dropped, there are financial obligations to the University. This form must be taken to the Dean's Office, LAW 202 for additional processing.
3. Update your personal information on the web by logging into **MyWashburn** and under the **Student Tab**, select "**Update Your Address Information.**"

**REQUIRED SIGNATURES**

\_\_\_\_\_  
DATE STUDENT

\_\_\_\_\_  
DATE STUDENT RECORDS ADMINISTRATOR

Copies: White – Student Records Administrator Yellow - Student

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**IMPORTANT NOTES**

**TOTAL HOURS AFTER CHANGE** \_\_\_\_\_

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