

COURSE CHANGE REQUEST

Student Name _____ SID# _____ Year Matriculated _____

Program M.Arch I M.Arch II M.E.D. Current Year 1 2 3 4

Email: _____

Request (submit only one request per form)

■ **Course Addition**

CRN# _____ Course # _____ Course Name _____

■ **Course Withdrawal**

CRN# _____ Course # _____ Course Name _____

Explanation of Request (if more space is needed, attach additional page)

Student Signature _____ **Date** _____

Registrar Signature _____ **Date** _____

■ **Variation from Normal Course Load**

(Students may take up to eighteen (18) credits per term without the permission of the Rules Committee. With the permission of the Rules Committee, students beyond their first year may take in any term up to a maximum of three (3) extra credits. Students not in their last semester who wish to take nine (9) credits or less in any term need permission of the Rules Committee. International students not in their last semester must remain full-time [more than nine (9) credits].)

Enrollment in _____ course credits for the Fall Spring term of the _____ academic year

If the student is not in last semester and requesting enrollment in nine (9) credits or less, this request must be reviewed by the Assistant Dean responsible for academic affairs. Otherwise it does not need to be reviewed by the Assistant Dean

Reviewed by _____ Date _____

Signature of Assistant Dean for Academic Affairs

Explanation of Request (if more space is needed, attach additional page)

RULES COMMITTEE

Meeting Date _____

Final Action Approved Disapproved Hold For _____

Comments _____

Approved by _____ Date _____

Signature of Chairperson Rule Committee