



Name: \_\_\_\_\_

Academic

Year: 20 \_\_\_\_\_ - 20 \_\_\_\_\_

**ADD/DROP FORM**

SONIS ID: \_\_\_\_\_

Date: \_\_\_\_\_

ADDS						DROPS ("W" grade must be taken after the 10th day of the semester)						
DEPT.	NO.	SEC.	SEM.	HRS.	INSTRUCTOR'S SIGNATURE	DEPT.	NO.	SEC.	SEM.	HRS.	"W" GRADE	INSTRUCTOR'S SIGNATURE

**\*Financial Aid and Billing may be impacted if total semester hours are reduced. State of Illinois MAP Grants require 15 enrolled hours to receive the full Grant amount. Athletic eligibility requires a minimum of 12 enrolled hours.**

*I understand that by changing my course schedule, my financial aid, billing, housing, and athletic eligibility may be effected.*

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

Approved:

Processed:

\_\_\_\_\_  
Academic Advisor

\_\_\_\_\_  
Registrar's Office

\_\_\_\_\_  
Housing (if student is dropping below 12 hours)

\_\_\_\_\_  
Date Processed