

UNIVERSITY OF MICHIGAN-DEARBORN REGISTRATION, ADD & DROP FORM

Name: _____ UMID: _____
 Last First Initial

Indicate Term: Fall 20 _____ Winter 20 _____ Summer 20 _____

Please submit completed form to Registrar's Office: registrars@umich.edu

	CRN	Subject	Course Number	Section Number	Grade Code	Credit Hours	Instructor's Signature <small>Signature not required unless course is filled or special permission required</small>
A D D							
	CRN	Subject	Course Number	Section Number	Grade Code	Credit Hours	Instructor Initiated Drop (Sign/Date) <small>Department Use ONLY</small>
D R O P							

Note: Non-attendance does not constitute a drop or withdrawal

Please read carefully, sign and date below:

Agreement: I am responsible for my enrollment in classes and for the following policies and procedures at the University of Michigan-Dearborn. I must notify the Registrar's Office, via the web, email, or in person, to withdraw from the semester or add/drop any classes. I accept responsibility for charges regardless of attendance in class. I have read the Tuition and Fee Payment Policy, online, which stipulates my payment obligations and the consequences if my account should become delinquent. I have read and understand the policies regarding academic regulations as published in the applicable Catalog and the Registrar's Office website (along with dates). I recognize I need to retrieve electronic documents from UM-Dearborn Connect at <http://web-sis.umd.umich.edu/>, i.e. ebill or 1098-T.

_____ Student Signature

_____ Date

Registrar's Office Use Only

Processed By: _____

Date _____