


APPALACHIAN STATE UNIVERSITY

Semester: ☐ Fall ☐ Spring ☐ Summer 1 ☐ Summer 2 Year: _____

BannerID_____Student Email_____@appstate.edu

 ☐ **ADD** Use this form to add courses after day 5 of the fall/spring semester (day 2 of summer term or half semester courses)

 **DROP** Only use this form for administrative drops.
Use this form ONLY after day 5 of the fall/spring semester (day 2 of summer term or half semester courses)

Exenuating reason for drop or add:	CRN Number	Course Department	4-Digit Course Number	Section Number
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4. _____

COB Undergraduate Advising Center Date