

## **Enrollment ADD/DROP FORM**

Must be submitted to the Office of the Registrar email: <a href="mailto:registrar@tamuk.edu">registrar@tamuk.edu</a>

## **Refer to the Academic Calendar for Class Enrollment Deadlines**

Name:						Semester:	Year:	
ID#: K						Undergraduate	Graduate	
Phone:						Doctoral	Non-Degree	
deadline to v  Connection.	alidate the	added cours	se. To viev	w the balance	due or to pri		any, prior to the tuition payment e, please log on to the <i>Blue &amp; Gold</i>	
Check Applicable Box(es)  Note: Instructor signature is not required if					uired if dro	oping a course(s).		
Add Dro	p CRN	Subject	Course #	Section #		Course Title	Instructor Signature	
* By signing this form, instructor is authorizing the Registrar's Office to override any pre-requisites.  Enrollment seating capacity ONLY if course is a closed session  CAPACITY OVERRIDE APPROVAL: If the addition of this enrollment causes the current enrollment to exceed the maximum enrollment, the following approval signatures are required from the appropriate college affiliated with the course.  Department Chair (or Proxy)								
Print	· · · · · · · · · · · · · · · · · · ·	Signature				Date		
	(	CRN	Subject	Course #	Section #	Course Title		
	(	CRN	Subject	Course #	Section #	Course Title		
Student Signature: Date							te	
Academic A	Advisor S f <u>ALL</u> stud	ignature: _ dents who a	re adding	g or droppin	g a course –	Da		
Athletic De	partment ( ( <b>Req</b> i	or Transitic <u>uired</u> if stud	onal Coor lent is: an	rdinator Signathlete (1 sig	nature: nature requir	ed) and/or enrolled for any	Date: Transitional course.)	
For Registrar's Office use only: Processed By						_	Date	
If you are	withdrawin	g from <u>ALL</u>				fice of the Registrar for mor <u>u</u> or call 361-593-2811.	e information and withdrawal forms -	