Student's ID Number	School	Major	Last Name	First Name	MI

<div align="right">

MISSISSIPPI STATE UNIVERSITY
ADD – DROP FORM
OFFICE OF THE REGISTRAR

</div>

Check EITHER DROP or ADD_ Enter DROPS First

	SYMBOL	NUMBER	SECTION	COURSE CODE	INSTRUCTORS	SIGNATURES
☐ DROP ☐ ADD					Instructor's Printed Name *Instructor's Signature/Date	Advisor's Printed Name Advisor's Signature/Date
☐ DROP ☐ ADD					Instructor's Printed Name *Instructor's Signature/Date	Academic Dean's Printed Name Academic Dean's Signature/Date
☐ DROP ☐ ADD					Instructor's Printed Name *Instructor's Signature/Date	Official Add – Drop Date Entered by Registrar

INDICATE TERM

INDICATE TERM

Fall   Spring   Other

Summer 1   Summer 2   Summer 10

IF ADMINISTRATIVE DROP,
DEAN ENTER EFFECTIVE DATE:

*Required for adding

Ver. 09/22/2021

Add/Drop Checklist

Student: Complete and submit to your advisor or department with add/drop form. If you cannot sign (physically or digitally), send form via your msstate email with a statement that you have read and agree to the form.

Name: _____ NetID: _____ MSU 9-digit ID: _____

	Before request	After request
Course hours		
Research hours		
TOTAL HOURS*		

If TOTAL HOURS are 0 hours after requested changes, **STOP. Withdraw from the university via Banner.*

Campus: 1 (Starkville)
5 (Online)
6 (Gulf Coast)

Term: Year: _____

Fall Spring/Winter
Maymester Summer 10
Summer 1 Summer 2

Parts of Term affected by your request
Full
Wintersession
First-half (mid-semester end)
Second half (mid-semester start)

Yes No Do you have a hold on your account? **Adds/Drops may not be processed until holds are removed*.

Yes No Will the add/drop change your status (full-time/part-time/overload)? **Overload requires a Waiver of Overload Policy Request form with the add/drop form*

Yes No Are you requesting to add a course after the 10th class day? **If yes, do not request an add unless you have an instructor signature on the add form and a plan in place that will allow you to complete course requirements successfully.*

My signature or emailed statement of agreement from my msstate email account certifies that I:
1) will contact my advisor if the requested add/drops have not been processed 10 business days after submission of this form.
2) understand that any or all add/drop requests and requests for administrative add/drops may be denied at any level.
3) am aware of any course, distance, or processing fees and/or tuition that may be incurred because of this add/drop request.
4) understand the impact, if any, adding or dropping these courses will have on my financial aid, scholarships, assistantships, immigration status, and employer reimbursement.
5) am responsible for all consequences resulting from adding or dropping these courses.

Student's signature: Date:

Advisor or major professor notes: Notes and signature are **required** ONLY IF requesting an administrative add/drop:

Administrative effective date: _____   If requesting administrative add/drop, explain in detail why:

Advisor/Major Professor's Signature: Date: