

# LAWSON STATE COMMUNITY COLLEGE DROP/ADD FORM

**STUDENT NUMBER**

**SEMESTER YEAR** \_\_\_\_\_

- Fall
- Spring
- Summer

**NAME** \_\_\_\_\_  
LAST
FIRST
MIDDLE/MAIDEN

- CAMPUS**
- Bessemer
  - Birmingham

\*PAID (REGISTERED) \_\_\_\_\_ NOT PAID (PRE-REGISTERED) \_\_\_\_\_

Complete **DROP/WITHDRAWAL** Yes \_\_\_\_\_ No \_\_\_\_\_  
 (\* Paid Students **MUST** drop/add in the Registrar's Office. **COMPLETE/FULL WITHDRAWALS** from school must use "WITHDRAWAL FORM" in the **REGISTRAR'S OFFICE.**)

Degree/Certificate (AA, AAS, AOT, AS, CER) \_\_\_\_\_ Major/Program of Study: \_\_\_\_\_

**ADD**

Call Number (FIVE DIGITS)	Dept. (CIS, ENG)	Course Number (080- 299)	Section	Course Title	Instructor's Signature

**DROP**

Call Number (FIVE DIGITS)	Dept. (CIS, ENG)	Course Number (080- 299)	Section	Course Title	Instructor

Processed by \_\_\_\_\_  
INITIALS

Date \_\_\_\_\_

**Total Hours Before Change**

**Total Hours After Change**

\_\_\_\_\_  
 STUDENT'S SIGNATURE

\_\_\_\_\_  
 DATE

STUDENT'S DAYTIME TELEPHONE: \_\_\_\_\_