REGISTRATION/DROP/ADD/AUDIT FORM

PLEASE USE HARD-POINTED PEN   **UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL**

Print Name: _____

    Last   *First*   *MI*

Term: ___ **Fall**   **Spring**   **1st Summer**   **2nd Summer**   **Year:** _____

                                 (circle one term)

Person ID: ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐   **School:** _____   **Major:** _____

INSTRUCTIONS: (Note - If initially registering, you must clear with University Cashier first.)

1 - This form is to be completed when add or drop transactions cannot take place by web registration DURING THE CURRENT SEMESTER (after the last day to add a course: and after the last day to drop a course with credit on Student's Financial Account each term). COURSE CHANGES AFTER THE END OF THE LAST DAY OF CLASSES FOR THE TERM MUST BE SUBMITTED ON A POST-SEMESTER REGISTRATION/ADD/DROP FORM.

2 - Do not use this form if dropping all courses. To drop all courses, you must follow University withdrawal procedures.

3 - After obtaining the required signature below (departmental approval required for adding courses only), submit this form to the University Registrar's Office, on the date signed by Adviser/Dean.

"D" for Drop "A" for Add "AUD" for Audit	Class Number	Course Name				Course Number				Section Number			Activity Type Lab/Rec			Credit Hours	Day/Time Building Room (add only)	Dept. Approval (initial for adds only)
SAMPLE A	31970	A	S	T	R	0	3	1	P	4	0	1	L	A	B	3.0	MWF 8:00-8:50 PH 201	DCR
SAMPLE AUD	5397	E	N	G	L	2	8	3		0	0	1	L	E	C	3.0		
1																		
2																		
3																		
4																		
5																		
6																		

Original - **University Registrar's Office**
Pink   **University Cashier's Office**
Yellow - **School Dean's Office**
Blue   - **Student**

OFFICE OF UNIVERSITY REGISTRAR USE ONLY

EFFECTIVE DATE:

Forging or altering approved entries will be reported as an Honor Code violation.

_____   _____
           Student's Signature   *Date*

_____   _____
           Adviser's Signature   *Date*

_____   _____
      Dean's Signature (if required)   *Date*