**ADD/DROP FORM**

**IMPORTANT NOTES:**
Dropping below full-time could affect the following: Financial Aid, Insurance, Athletic Status, and International Student Status. **You must obtain course overrides before submitting this form to Registration & Academic Services (see note below).**

LIN: ______________________ Name: _____________________________ Lehigh Email: ________________

Term: __________ Major: __________________________ College: ______________

<table>
<thead>
<tr>
<th>CRN</th>
<th>Department</th>
<th>Course No.</th>
<th>Section</th>
<th>Credit Hours</th>
<th>Departmental/Instructor Approval *</th>
</tr>
</thead>
<tbody>
<tr>
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<td></td>
<td></td>
<td></td>
<td>Only required after 5th day of classes</td>
</tr>
</tbody>
</table>

|     |            |            |         |              | After 10th day DROP / 5th Day in Summer | Date |

Signatures*:

Advisor: __________________________ Date: __________

Student: __________________________ Date: __________

* Signatures on this form confirm the student has discussed the registration change with the necessary individuals. Any needed overrides, such as capacity, prerequisite, department/instructor approval, etc., must be issued by the department online through Banner prior to submitting this form to RAS.

This change will not be official until signed by Registration & Academic Services. **This form must be submitted in person to Registration & Academic Services. Students in distance education programs may submit a scan of this form with signatures via email at ras@lehigh.edu.**

For RAS Completion:

Processed: __________________________ Date: __________