



Please fax this completed form to 202-464-0165 or mail/hand-deliver it to:
Registrar's Office (IWP, 1521 16th Street, NW, Washington, DC 20036).

Student Information

Name: _____		Semester: <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer 20_____	
Last	First	M.I.	
Address: _____		Today's Date: _____	
City: _____	State: _____	Zip Code: _____	
Email Address: _____		Telephone #: _____	

COURSE(S) TO BE DROPPED

If you are dropping/withdrawing from all of your courses...STOP! This is the wrong form. You must complete the Complete Withdraw Form.

Please Note: Any courses that are dropped after the add/drop period for a given term will be considered withdrawals. Students will receive a grade of "W" on their official IWP record and are subject to the refund policy as outlined in the Withdrawal and Refund policy section of the Catalog. Dropping or withdrawing from classes may affect your financial aid, please contact the financial aid office before you drop or withdraw.

IWP Course #	Section	Title	# of Credits (or Audit)
Total Credits:			

COURSES TO BE ADDED

IWP Course #	Section	Title	# of Credits (or Audit)
Total Credits:			

By signing this form, I acknowledge that dropping/withdrawing and/or adding courses may affect my billing for tuition charges, may affect any financial aid that I have been awarded.

Student Signature: _____ Date: _____

Internal Office Use	
Date Received _____	Date Processed _____