

John Paul II Institute
For Studies on Marriage and Family

COURSE ALTERATIONS

Student Information:

Student ID:		Last Name:		First Name:	
Circle Degree:	NDS MTS STL STD PHD	Circle Year in Program:	1 2 3 4 5	Direction	
Calendar Year:		Term:	<input type="checkbox"/> Fall	<input type="checkbox"/> Spring	

Course(s) to be Deleted *(no record on transcript):*

FILL IN ONLY ONE

Number	Title	Credit Hours	Audit Hours	Professor

Course(s) to be Added:

FILL IN ONLY ONE

Number	Title	Credit Hours	Audit Hours	Professor

Change from Credit to Audit:

Number	Title	Professor	NEW STATUS	Audit Hours
			Audit	
			Audit	

Change from Audit to Credit:

Number	Title	Professor	NEW STATUS	Credit Hours
			Credit	
			Credit	

Change to Withdraw *("W" appears on transcript):*

Number	Title	Professor	NEW STATUS	Credit Hours
			Withdrawn	
			Withdrawn	

Signature of Student

Date

Signature of Academic Adviser

Date

Please photocopy and give copies to:	<input type="checkbox"/> Student	<input type="checkbox"/> Advisor	<input type="checkbox"/> Registrar	<input type="checkbox"/> Bookkeeper
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