

# Worcester Polytechnic Institute

Office of the Registrar

## Undergraduate Add/Drop Form

Student ID #: 

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Please print your name: \_\_\_\_\_, \_\_\_\_\_  
(Last) (First)

Student Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Overloading (4/3 in one term)** – requires **Academic Advisor** approval

Academic Advisor (printed name): \_\_\_\_\_

Academic Advisor (signature): \_\_\_\_\_

**Enrolling in a Closed Course (full course)** – requires **Instructor** approval

Instructor (printed name): \_\_\_\_\_

Instructor (signature): \_\_\_\_\_

Please note: Overloads and closed classes will not be added to the student’s schedule until the first day of the term.

**Special Approval** – requires **Instructor** approval

Instructor (printed name): \_\_\_\_\_

Instructor (signature): \_\_\_\_\_

*Example*

ADD				DROP			
Term	CRN	Course	Section	Term	CRN	Course	Section
A	12345	BME 2511	A01	B	12245	IMGD 1001	B02

508-831-5211 (tel) 508-831-5931 (fax)

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