COURSE ACTION FORM

Student Name_____________________ Student ID #__________________

Student email:_____________________Student Department:___________

Action Requested: ☐ Add ☐ Drop ☐ Change of Data

Reason for needing action:
☐ Course restricted
☐ Permission of instructor required
☐ Missed Deadline
☐ Course full

Instructor Signature (required)

Director of Graduate Studies

The Course Action Form is to be used only to make changes in your schedule that cannot be made by using SIS.

Use a separate form for each course; the second line can be used for a dependent discussion section or lab connected with the primary course.

With these changes, I will be enrolled for ___ credits. Approval to go above the maximum or below the minimum allowed by my school requires the approval of the dean's office.

Form must be submitted to GSAS via email through the student’s department.