EMBRY-RIDDLE AERONAUTICAL UNIVERSITY - PRESCOTT
COURSE REGISTRATION – SCHEDULE CHANGE

Name _____ **STUDENT ID** _____ **Box #** _____
Last Name **First Name**

Today's Date _____ **Circle appropriate registration semester:** **Fall - Spring - Sum A - Sum B - Sum C** **Year: 20**_____

COURSES ADDED ********** SPECIAL PERMISSION SIGNATURES**********

Dept/Course	Sec#	Credit Hours	Check if Auditing*	Instructor signature for Override		Instructor Signature After Last Day To Add Class	Dean Signature After Last Day To Add Class
				Closed Course	Time Conflict		

***NOTE: Student understands there will be no credit awarded for Audited courses.**

COURSES DROPPED ********** SPECIAL PERMISSION SIGNATURES**********

Dept/Courses	Sec #	Credit Hours	Instructor Signature Required To Receive A "W" Grade After Last Day To Withdraw Class	Dean Signature Required To Receive A "W" Grade After Last Day To Withdraw Class
NOTE: ALL STUDENT DATA WILL BE DELETED FROM BLACKBOARD FOR THIS COURSE AND CANNOT BE RETREIVED.				

Total Credit Hours _____

Advisor Overload approved for over 16 credits____ _____ **Student's Signature** _____

Date Processed _____ **By** _____ **Advisor's Signature** _____

W/AU Grade verified in FGID (After "W" Grades Begin) _____ **Athletic Dept. Signature**_____

Statement of Student's Responsibility
Failing to register for or maintain full-time status (12 credits) may affect eligibility for financial aid, international student status, and insurance. I am aware that academic advising is always available to me from my assigned advisor during my enrollment at ERAU. I have prepared this class schedule with the understanding that I am completely responsible and liable for the choice of courses and their effect on my academic progress toward a degree. I will adhere to the prerequisites and co-requisites of each course I choose.

RO revised 08/2009