

CAS Registrar's Office
Add/Drop/Withdrawal Form

Return this form to the CAS Registrar's Office



Lewis & Clark College
 0615 SW Palatine Hill Rd, MSC 108
 Portland, OR 97219-7899
 Phone: 503.768.7335 | Email: reg@lclark.edu

First Name _____ Last Name _____ Email Address _____

 LC ID # _____ LC Box # _____
 Fall Spring Year: _____

Courses to **DROP** or **WITHDRAW** (Drop within the two week Add/Drop period. Withdrawal after the Add/Drop period):

Credits	Department	Course #	Section #	Course Title	Instructor Signature (required after 10th week)	Date
4	BIO	221	02	Marine Biology - EXAMPLE -	- EXAMPLE -	1/19/15

Courses to **ADD**:

Credits	Department	Course #	Section #	Course Title	Instructor Signature (always required to ADD)	Date

Total credits before change
 Total credits after change*

Advisor Signature (required for First Year students only) _____ Date _____

Processed by:

*To register for more than 19 credits, submit a completed Overload Authorization Card with this form (maximum 21 credits)

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