Add Form

Use this form to: *** add a new course**
*** add credit to an existing course**

ANTIOCH UNIVERSITY

Name (print) _____Student ID_____

Term & Year_____ Daytime Phone#_____

Incomplete forms, including required signatures, will not be accepted. Submit your completed form first to the Student Accounts Office for clearance. You may be required to pay tuition at the time you submit this form.

☑	Select Reason(s)	Required Signature(s)
	online registration is closed	**1. student & 2. instructor**
	add credit to an existing course	**1. student only**
	overload a course	**1. student & 2. program dean or director & 3. instructor**
	overload of credit	**1. student & 2. advisor or program office manager**
	waived prerequisite	**1. student & 2. advisor or program office manager**
	Leave of Absence registration	**1. student only**
	Enrollment Maintenance registration	**1. student only**

Add a New Course (use additional forms as needed)

Complete Course # Required (ex. 30PSYC-590-1)	Course Title	# Credits
30 - -		
30 - -		
30 - -		
30 - -		

X_____ Date_____
Instructor, Advisor or other Required Program Signature (see above)

X_____ Date_____
Instructor, Advisor or other Required Program Signature (see above)

Add Credit to an existing course (to decrease credit, use a Drop Form)

Complete Course # Required (ex. 30PSYC-590-1)	Course Title	Old # Credits	New # Credits
30 - -			
30 - -			

➔➔➔My overall credit load will increase from _____ credits to _____ credits.

Student: I am responsible for payment of the associated tuition and fees for these and other classes I may already be registered in at Antioch University Seattle. I agree to comply with the Student Financial Policies of Antioch University.

X_____ Date_____
Student Signature

Submit this form in person, by mail, fax or scan: **AUS Registrar's Office**
Questions? (206) 268-4772 **2326 Sixth Ave.** **registrar@antiochseattle.edu**
Seattle, WA 98121-1814 **fax: (206) 268-4242**

Office Use Only	RG	FA	Sub	Unsub	Perk
Date Recd	SA		PL	Pell	SEOG

Rev 11/10