

DELTA STATE UNIVERSITY ADD FORM

DSU ID 900 ### ###
900

NAME _____

Telephone Number _____

Email _____

****Approval from Student Business Services (SBS) required on all added hours for part-time students and full-time students whose total credit/bill hours will be greater than 19.****

ADD COURSE

CRN	DEPT	COURSE#	SEC	HRS	TIME	DAY	INSTRUCTOR

IF AFTER DEADLINE
to ADD CLASSES
INSTRUCTOR APPROVAL
SIGNATURE IS REQUIRED

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Signatures in Order

- 1. Advisor _____
- 2. Dean _____
- 3. SBS _____
- 4. Registrar _____
- 4. Date Received _____