



STUDENT INFORMATION

First Name

Last Name

Phone Number

Student ID Number

SEMESTER Fall Spring Summer Year:

COURSE DETAIL

Add	Drop	5-Digit Class Number					Subject & Catalog # (e.g., ENGL 102)	Section (e.g., 001)	Number of Credits	Permission Number (if needed)

OVERRIDE REASON - SELECT ONE

Allowing for a Section Change
 If, after the last day to drop with a W for that session, you will need approval from the University Academic Appeals Committee. Include this form with your Academic Appeal Form: boisestate.edu/registrar/home/student-forms/

Instructor Name (Printed) _____ Instructor Signature _____ Date _____

Dropping a Class that is a Co-Requisite of Another Class
 A signature is required for the class that will remain on your schedule to confirm approval that the prerequisites are no longer met.

Department or Instructor Name (Printed) _____ Department or Instructor Signature _____ Date _____

Adding a Full or Closed Workshop
 Instructor Name (Printed) _____ Instructor Signature _____ Date _____

Time Conflict
 You will need a signature from both course instructors.
 Instructor Name (Printed) _____ Instructor Signature _____ Date _____

Instructor Name (Printed) _____ Instructor Signature _____ Date _____

Adding a Class After the Deadline
 You will need approval from the University Academic Appeals Committee. Include this form with your Academic Appeal Form: boisestate.edu/registrar/home/student-forms/

Instructor Name (Printed) _____ Instructor Signature _____ Date _____

Changing a Class from Credit to Audit OR from Audit to Credit after the Deadline
 You will need approval from the University Academic Appeals Committee. Include this form with your Academic Appeal Form: boisestate.edu/registrar/home/student-forms/

Instructor Name (Printed) _____ Instructor Signature _____ Date _____

Other - Please Explain

STUDENT SIGNATURE

Student Signature _____ Date _____