

Registration Revision Form

The purpose of this form is to make desired revisions to your original course registration form.

NOTE: UIC campus students must follow the policies and procedures established by the College and OAR. Master of Engineering degree students must submit this form to the MEng office for completion.

_____-_____-_____
Social Security Number

Last Name

First

MI

Term _____ 20____

DROP			ADD		
Call No.	Subject	Course No.	Call No.	Subject	Course No.

If you are dropping one or more courses, please provide your reason(s) for doing so. Please be as specific as possible, providing an explanation for each course if reasons vary. (**NOTE:** Completion of this section is required.)

(continue on reverse side if necessary)

Please withdraw me from all courses for the above term. I understand that withdrawing from all courses may affect my admission status if I do not follow the policies and procedures established by the College and OAR.

Student Signature

Date

Dean/Program Director

Date

MEng Contacts:

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