



201 S. Grant Ave. • Columbus, OH 43215  
 614.797.4700 • 1.877.341.6300  
 www.franklin.edu

# COURSE REGISTRATION & ADD/DROP FORM

Date  Major  Trimester:  Fall  Spring  Summer  Year

Student's name  Student ID #

Address  City  State  Zip

Day phone/Evening  Email

**ADD COURSE(S) — Attention new students: Once you register for a course, you will be assessed a one-time \$25 non-refundable Initial Registration Processing Fee.**

Course Code			Course Title	Time	Day
Department	Catalog #	Section			
Ex. Acct	110	02			

**NOTICE**

Are you receiving Financial Aid?  
 Yes  No

Dropping classes will likely affect your financial aid award. Contact your Financial Aid Advisor for more information.

**If you are dropping a course(s), Federal regulations require that we capture your intent to continue in upcoming classes this term and process aid accordingly:**

I plan to stay enrolled for my remaining courses this term

**DO NOT** plan to stay enrolled for my remaining courses this term (*selecting this option does not drop your remaining courses. You are responsible for dropping your other courses. Selecting this box will impact your Financial Aid awards*)

**DROP COURSE(S) — After the first week of classes, you will be assessed charges based on the date of withdrawal.**

Course Code			Course Title	Office Use Only	
Department	Catalog #	Section		Date	% charged
Ex. Acct	110	02			

**Primary reason for DROPPING this class – Mark X in one box**

- |                             |                                 |                             |                                      |
|-----------------------------|---------------------------------|-----------------------------|--------------------------------------|
| 01 <input type="checkbox"/> | Did not like the instructor     | 10 <input type="checkbox"/> | Inconvenient location                |
| 02 <input type="checkbox"/> | Did not like the course content | 11 <input type="checkbox"/> | Too many absences                    |
| 03 <input type="checkbox"/> | Switching sections or course    | 12 <input type="checkbox"/> | Coursework too hard                  |
| 04 <input type="checkbox"/> | Financial difficulties          | 13 <input type="checkbox"/> | Coursework too easy                  |
| 05 <input type="checkbox"/> | Employee reimbursement loss     | 14 <input type="checkbox"/> | Course-delivery format               |
| 06 <input type="checkbox"/> | Moving/job transfer             | 15 <input type="checkbox"/> | Over-enrolled for trimester          |
| 07 <input type="checkbox"/> | Work schedule conflicts         | 16 <input type="checkbox"/> | Transferring to another institution  |
| 08 <input type="checkbox"/> | Health issues                   | 17 <input type="checkbox"/> | Need prerequisite(s)                 |
| 09 <input type="checkbox"/> | Inconvenient time               | 18 <input type="checkbox"/> | Other (specify) <input type="text"/> |

Student's Signature  Date

Academic Advisor's Signature  Date

Fax: 614.224.0434 or email: registrar@franklin.edu

**Office Use Only**

Computer updated (initials/date):

Academic Advisor Comments: