

National University of Natural Medicine
ADD/DROP ■ SECTION CHANGE ■ SECTION SWAP

- **Students who are on federal financial aid and whose reduced course loads change their status from full-time to part-time must meet with the Director of Financial Aid.**
- **To change to audit** – List the course(s) and circle appropriate action. Instructor signature required.
- **To drop core curriculum courses** – Signature from the dean is required.
- **Lab and retreat fees** – Non-refundable after the term begins.
- **Week 1** – Students may add/drop/change sections/change to audit and receive a 100% tuition refund.
- **Week 2** – Students may add/drop/change sections/change to audit and receive 75% refund.
- **Week 3** – Instructor/Dean signature is required and they must indicate if drop pass (i.e. “W”) or drop fail (i.e. “WF”) and receive a 50% tuition refund
- **Week 4** - Instructor/Dean signature is required and they must indicate if drop pass (i.e. “W”) or drop fail (i.e. “WF”) and receive a 25% Tuitions refund
- **Weekend courses** – May add/drop before course begins with full tuition refund (no refund on lab or retreat fees).

Name (Please Print) _____ Mailbox ____ Term ____ Program _____

Signature _____ Date _____

Please circle appropriate action:

Add /Drop/Change to Audit _____
Course # Course Title Section Day Time

Instructor Signature if after week 2 _____ Grade (i.e. W or WF) _____

Add /Drop/Change to Audit _____
Course # Course Title Section Day Time

Instructor Signature if after week 2 _____ Grade (i.e. W or WF) _____

Please fill out this section to request a section change. Only two lab/small group class changes will be honored.

Course # and Name Assigned Section Desired Section w/Date & Time

If you have found someone with whom to swap, please fill out this section.

They are: _____ Their Mailbox: _____

	<u>Course # and Name</u>	<u>Assigned Section</u>	<u>Desired Section w/Date & Time</u>
I am in:			I Want:
They are in:			They Want:

Their signature: _____ Date: _____

Program Dean or designee (needed if dropping required course) Registrar’s Office Signature (needed if dropping elective):

Signature _____ Date _____

Financial Aid (needed if dropping below full time):

Student has been advised on Financial Aid eligibility _____
Signature Date