

Graduate Drop/Add Form

BOSTON COLLEGE
Office of Student Services

Instructions: Use this form ONLY when dropping one course and adding another for an EQUAL number of credits.

Today's Date _____

Eagle ID Number

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Name _____
Last First

DROP

Index #	Course #	Credits*															
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ADD

Index #	Course #	Credits*															
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* Must be the **same** number.

Academic Year _____ to _____

Semester:

- First
- Second
- Summer

School:

- Carroll Graduate School of Management (11)
- Connell Graduate School of Nursing (14)
- Graduate School of Arts & Sciences (02)
- Graduate School of Social Work (06)
- Law School (04)
- Lynch Graduate School of Education (10)
- School of Theology and Ministry (18)

Department Approval: _____
(If required by your department)

Date: _____

Dean Approval: _____
(Required after registration deadline)

Date: _____