

BARSTOW COLLEGE
ADD-DROP FORM

Please print clearly.

Last Name	First Name	MI	SSN		
CRN	COURSE NAME	UNITS	CHECK ONE		INSTRUCTOR
			ADD	DROP	

Student Signature	Date
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TURN OVER TO INDICATE DROP REASON(S)

Counselor Signature (if required)

REASON FOR DROP:

- Accepted Elsewhere (AE) 4-year college/university 2-year college/university
- Work (JO)
- Relocating (RE)
- Financial Difficulty (FD)
- Personal (PR)
- Child Care (CC)
- Transportation (TR)