

## **Change of Registration Request**

Instructions: Consult your Advisor before changing your schedule. You may use this form if you are unable to make changes on your schedule through your NEST account. Complete, print, obtain appropriate approval, then submit to the Registrar's Office (registrar@creighton.edu; FAX 402-280-2527; Brandeis 202).

## **PLEASE NOTE:**

- Add, Drop, and Withdrawal deadlines vary depending on the type of course or college/school. Consult your college/school's academic calendar for current information.
- Academic Calendars are posted at www.creighton.edu/registrar/academiccalendars/.

Student Name:  Student Signature:  College/School:  College of Arts & Sciences  College of Professional Studies						NET ID:	
						Date:	
						☐ Graduate School	
ADD:	y add course	es to vour	schedule	on the N	EST through the Add deadline.		
CRN	Subject	Crs #	Sect	Hrs	Course Title	Instructor Signature	
OROP: You may CRN	y drop cours	crs#	NEST the	rough the	Drop deadline.  Course Title	Instructor Name	
CIVIV	Jubject	CI3#	Ject	1113	Course ritte	mistractor Name	
onsult yo fter the l vithdraw	Drop deadline n courses, a g	e and prior grade of W	to the Witwill appea	thdrawal a r on your	rawals. Withdrawing from one or modeadline, you may withdraw from a cotranscript (does not affect GPA) and tourses, DO NOT use this form. See you	urse with the required authorizatio uition will be charged (see Refund P	
dvicor o	ar Dean's Off	ice Annros	val				
dvisor o	or Dean's Off	ice Approv	val			Date	