



**STEVENS**  
INSTITUTE of TECHNOLOGY  
THE INNOVATION UNIVERSITY

**Office of the Registrar**  
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## Change of Enrollment

LAST NAME			STUDENT IDENTIFICATION NUMBER		
FIRST NAME			MIDDLE NAME		
MAILING ADDRESS OR SIT BOX	STREET				<input type="checkbox"/> UNDERGRADUATE CLASS OF 20 ____ <input type="checkbox"/> GRADUATE
CITY	STATE	ZIP CODE			
STUDENT SIGNATURE <i>B. ...</i>					DATE 5/2/2021

- The signature of the instructor and reason is required for prerequisite waivers, waiving cap, etc.
- The signature of the instructor is required for adds after the end of the drop/add period.
- Drops after the end of the drop/add period will be recorded as withdrawals (**W**) on the transcript.
- **For Graduate Withdrawals:** The signatures of the instructor, advisor and the Dean of Graduate Academics are required after the specified date in the academic calendar.
- **For Undergraduate Withdrawals:** The signatures of the instructor and approval of the Office of Undergraduate Academics are required after the specified date in the academic calendar.

**TERM:** ☐ FALL ☐ WINTER ☐ SPRING ☐ SUMMER I ☐ SUMMER II ☐ YEAR TERM    **YEAR:** 20 \_\_\_\_  
**ADD**

SUBJECT (e.g. MA)	NUMBER (e.g., 123)	SEC. (e.g., A)	CRED.	INSTRUCTOR'S SIGNATURE	DATE	REASON FOR OVERRIDE (INSTRUCTOR USE ONLY)

### DROP/WITHDRAW \*\*

SUBJECT	NUMBER	SEC.	CRED.	INSTRUCTOR'S SIGNATURE	DATE	NOTES (INSTRUCTOR USE ONLY)
				<i>[Signature]</i>	5/3/21	

### APPROVAL SIGNATURES

(Graduate students only) ADVISOR (Drops after the specified date) \_\_\_\_\_ DATE \_\_\_\_\_

OFFICE OF UNDERGRADUATE ACADEMICS/DEAN OF GRADUATE ACADEMICS (Drops after the specified date) \_\_\_\_\_ DATE \_\_\_\_\_

REGISTRAR \_\_\_\_\_ DATE \_\_\_\_\_

ADVISOR/DEAN SPECIAL INSTRUCTIONS: