CIRCLE SEMESTER
F Sp Su Year_____

REGISTRATION & DROP/ADD FORM

Office of the Registrar - University of West Florida

It is recommended that students review their SASS audit and discuss academic plans with an advisor prior to registration. Students ultimately are responsible for knowing and fulfilling all University, College, and Major requirements for graduation.

UWF I.D. NUMBER | LAST NAME | FIRST | M.I.

LOCAL ADDRESS (NOT to be used as address change form) | DAYTIME PHONE NUMBER | E-MAIL ADDRESS

4 DIGIT REF NO.	COURSE PREFIX & NO.	HOURS CREDIT	GRADING OPTIONS* 'P' PASS/FAIL	GRADING OPTIONS* 'X' AUDIT	ADD = A DROP = D	PERMISSION/ AUTHORIZATION CODE	COMMENTS

*Grading Options: BLANK indicates letter grade; "P" indicates pass/fail option; "X" indicates audit

ALTERNATE COURSES

DIRECTED INDEPENDENT STUDY

FIND						Term	Location

DIRECTED STUDY TITLE (LIMITED TO 18 SPACES) ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

INSTRUCTOR'S NAME (PRINTED) _____ INSTRUCTOR'S SIGNATURE _____

MILITARY/CIVIL SERVICE INFORMATION

Check ONE in each applicable category which best reflects your current status.

[Definition of ***dependent*** is under age 24.]

MILITARY STATUS
- ___Active Duty Enlisted ___Reserve Enlisted
- ___Active Duty Officer ___Reserve Officer
- ___Retired Military
- ___Dependent or spouse of Active Duty Military
- ___Dependent or spouse of Retired Military

MILITARY LOCATION
- ___Eglin AFB ___NTTC Corry Station/NRMC
- ___Hurlburt AFB ___Saufley Field
- ___NAS Pensacola ___Whiting Field
- ___Tyndall AFB ___Other

CIVILIAN EMPLOYED BY DOD
- ___Civilian (currently employed on military base)
- ___Civilian (currently employed with military contractor)
- ___Dependent or spouse of currently employed civilian on military base
- ___Dependent or spouse of currently employed civilian with military contractor

OFFICE USE ONLY

_____ Processed by (initials) _____ Date

As a student of UWF, I accept responsibility for my course selection and have reviewed the academic policies and procedures for registration as stated in the Catalog.

STUDENT'S SIGNATURE _____ Date_____

WITHDRAWALS ARE NOT AUTOMATIC
Distribution: R&R (Original)

FEES MUST BE PAID BY LAST DAY OF DROP/ADD
Rev 031406