



**ADD Course AFTER
Add/Drop Week**

Please return form to the Office of the Registrar at Registrars@ben.edu from your BenU email.

PART I COURSE CHANGES

To be completed by the student

Term 20 _____ Fall _____ Winter _____ Spring _____ Summer _____

Name _____ Student ID# _____
(Print) Last First MI

Check here if you are a Student Athlete

COURSES ADDED

CLASS #	SUBJECT	CATALOG # & SECTION	HRS.	COURSE TITLE
<i>i.e. 1249</i>	<i>LITR</i>	<i>150/A</i>	<i>3</i>	<i>Themes in Literature</i>

PART II Approvals/Signatures

Department Chair signature/Date	
Instructor's signature/Date	
Academic Advisor signature/Date	
Athletic Advisor (Athletes only) Signature/Date	

Students are responsible for obtaining all signatures prior to returning to Registrars@ben.edu for processing.

I ACKNOWLEDGE THAT I AM FINANCIALLY RESPONSIBLE FOR THE CHANGES IN THE EVENT OF ADDING CLASSES, WHICH MAY EXCEED THE 18 HOUR LIMIT.

Student's Signature Date Total Hours after Change

PART III Processing

To be completed by the Office of the Registrar

Date Processed Processor's Signature