ENROLLMENT ADJUSTMENT (PRIOR TO LATE ADD)

Form is to be completed for: add/drops prior to deadline, variable-credit adjustments, course permissions, co/pre-requisite override, undergraduate, overload enrollment, and auditing. Department approval is required for all requests. Email completed forms to OneStop@fiu.edu.

Student Name: _____________________________________________________________Panther ID: ______________________
(Print Last, First)

Term (Circle One): Fall  Spring  Summer  20_____

X_________________________________________ Date: ______________________
Student's Signature  By Signing above I am agreeing to the Terms & Conditions on the back of this document.

<table>
<thead>
<tr>
<th>ADDS</th>
<th>DROPS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class Number: 12345</td>
<td>Class Number: 12345</td>
</tr>
<tr>
<td>Subject: ENC</td>
<td>Subject: ENC</td>
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<tr>
<td>Course Number: 1101</td>
<td>Course Number: 1101</td>
</tr>
<tr>
<td>Grading Option:</td>
<td>Grading Option:</td>
</tr>
<tr>
<td>Course credits:</td>
<td>Course credits:</td>
</tr>
</tbody>
</table>

The following signatures may be required when requesting to add or drop a course.

____ Auditing a course. An audit request must be made at the time the course was enrolled.
____ Adding to a closed class. Requests can only be granted if the room capacity has not been met.
____ Adding to a class that has a time conflict. Professor MUST attach written confirmation on a separate document.

Advisor’s Name  Signature  Date
____ Overriding a prerequisite not meet. Department stamp is required.
____ Dropping a co-requisite course. Department stamp is required.
____ Other (Please specify reason for add/drop on separate document)

Academic Dean’s Designee Name  Signature  Date
____ Undergraduate student requesting to enroll for 19 credits or more. Note: Graduate students requesting to enroll for 16 credits or more will need to initiate a request with their academic department.

OneStop Internal Process (Check off if student is one of the following):
____ Financial Aid (If dropping below half time, must complete Financial Aid Drop form)
____ International Student (If dropping all courses, student must complete the withdrawal form and have it signed off by ISSS. An international student cannot drop a course with a DR grade if they are only enrolled in 12 credits.)
____ Veteran (If adding /dropping, students must report this to the veteran’s office)
____ Student-Athlete (Course(s) cannot be dropped without written permission from Athletics Compliance or SAAC)

Processed by: ___________________________ Date: ___________________________ OneStop Date Stamp

SUBMISSION INSTRUCTIONS

1) Submit completed form to OneStop email, OneStop@fiu.edu
   Phone: 305-348-7000

Rev.10/03/2022
Terms and Conditions

I acknowledge and accept that as a student at Florida International University, in consideration for my enrollment in classes, I understand and agree to the following terms and condition.

1. I am aware that tuition and fees are set forth in FIU Regulation 1101 - Tuition and Fees Schedule.
2. I am responsible for my own enrollment and for adhering to all published deadlines.
3. I am responsible for the payment of any class for which I register or have authorized a university representative to register me. If I initiate registration for the semester on or after the first day of classes, I will be assessed the Late Registration Fee specified in FIU's Regulation 1101.
4. I must drop any class I do not want on my permanent record by the end of the Add/Drop period, as published by the university's Academic Calendar. I will refer to the Academic Calendar for all relevant deadlines.
5. I am financially liable for tuition and fees for all classes I drop after the applicable Add/Drop deadline, and understand that I will receive a permanent DR grade on my transcript for such classes.
6. If my tuition and fees are not timely paid and I have not made the appropriate payment arrangements by the designated deadline, my account will be considered delinquent.
   a) I understand that should my account become delinquent, collection efforts will be made and that I will be responsible for the costs of the collection efforts. Additionally, should a collection agency be engaged, I understand that I will be responsible for any fees charged by the collection agency.
   b) I understand that my classes MAY be dropped for non-payment, and that I will have a limited amount of time to be reinstated into my classes, subject to any applicable fees.
7. I understand that should my account become delinquent, a hold will be placed on my records which will prevent me from requesting transcripts, receiving grades or registering for future terms until the account is settled.
8. I am aware that I have six months after a semester ends to submit an appeal to drop/withdraw from classes with proper documentation.
9. I am aware that any changes made to my enrollment could impact any financial aid.
10. I am aware that all official University communications will be sent to my FIU student email account. I also understand that all student-initiated communications to Enrollment Services must be sent via my FIU student email account.

Student's Signature ____________________________ Date: __________________________

By Signing above I am agreeing to the Terms & Conditions listen above

FIU has an emergency notification system in place, known as FIU Alert, to alert the FIU community should an emergency arise on campus that poses an immediate threat to life safety. One component of this system uses cellphone text messaging. Please submit YOUR cell phone number below to receive emergency text notifications. Standard text messaging charges may apply. If you would like to learn more about all of the components of FIU Alert, please visit http://dem.fiu.edu.

FIU Alert - Please enter a cellular phone number that can receive text messages (SMS). If this number cannot receive text messages you may still receive voice calls from FIU Alert.

Emergency Notification Information

Cell Phone Number ____________________________ or Other ____________________________

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