



Return to Records Office
 1355 West Highway 10
 Anoka, MN 55303
Fax: 763-576-7721
Email: Registrar@anokatech.edu
Phone: 763-576-7740
www.anokatech.edu

Add/Drop Form

Name: _____

Student/Star ID#: _____

Email: _____

Phone: _____

Major: _____

Semester (select one): Fall Spring Summer **Year:** _____

Course ID# <i>Ex. 000243</i>	Department <i>ENGL</i>	Number <i>1121</i>	Title <i>Composition 1</i>	Section <i>02</i>	Credits <i>4</i>	Start Date <i>mm/dd/yyyy</i>	Select One	
							ADD	DROP

Student Signature: _____

Date: _____

Instructor Signature: _____

Date: _____

(Required when adding a course after the add/drop period)

Records Office Use Only: Processed by _____

Date: _____

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