

Student's ID Number      School      Major      Last Name      First Name      MI

**MISSISSIPPI STATE UNIVERSITY**  
**ADD – DROP FORM**  
OFFICE OF THE REGISTRAR

**Check EITHER DROP or ADD\_ Enter DROPS First**

	SYMBOL	NUMBER	SECTION	COURSE CODE	INSTRUCTORS	SIGNATURES
DROP					Instructor's Printed Name	Advisor's Printed Name
ADD					Instructor's Signature/Date	Advisor's Signature/Date
DROP					Instructor's Printed Name	Dean's Printed Name
ADD					Instructor's Signature/Date	Dean's Signature/Date
DROP					Instructor's Printed Name	Official Add – Drop Date Entered by Registrar
ADD					Instructor's Signature/Date	

**INDICATE TERM**

**199**

Fall      Spring      Other

**200**

**201**

Summer 1      Summer 2      Summer 10

**IF ADMINISTRATIVE DROP,  
DEAN ENTER EFFECTIVE DATE:**