كلية فاطمة للعلوم الصحية
FATIMA COLLEGE OF HEALTH SCIENCES

بوليتكنك
POLYTECHNIC

ADD / DROP FORM

Student Name		ID	
Program		Academic year-semester	
Contact No:		Campus	

- Full time student load should not be less than 12 CR H or more than 18 CR H.
- Students with probation are not allowed to register for more than 12 CR H
- Outstanding student with CGPA ≥ 3.6 or expected to graduate student can register for maximum of 21 CRH

ADD ONLY ☐   **DROP ONLY** ☐   **ADD/DROP** ☐

Total number of credit hours the student registered currently (_____)

Course (s) to be ADDED			
CRN	Course Code & No	Course Name	Credits

Course (s) to be DROPPED			
CRN	Course Code & No	Course Name	Credits

Total numbers of credit hours after add (_____) & drop (_____)

Advisor Name & Signature: _____ Date; _____

Head of department Signature: _____ Date: _____

Student Service Sr. Manager Signature: _____ Date _____

Official Use	
Remarks:	
Registration office:	**Date:**

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