

# Credit Course Add/Drop Form



Newburgh Campus 1 Washington Center, Newburgh, NY 12550  
 Middletown Campus 115 South Street, Middletown, NY 10940  
 (845) 341-4140 • registrar@sunyorange.edu

Name of Student (Last, First, Middle Initial)	Student ID#: A	Date:
Address: City: _____ State: _____ Zip: _____		
Number of Credits Currently Registered in: _____		
Is this a complete withdrawal from SUNY Orange this semester? Yes No		

Semester/Year: Fall \_\_\_\_\_ Winter \_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_

Add Course						
CRN	Subject	Course	Section	Credits	Campus	Faculty Signature

Drop Course						
CRN	Subject	Course	Section	Credits	Campus	Faculty Signature

By signing this form you acknowledge, the above information is correct and you understand that a reduction in semester's credits may result in a reduction or loss of financial aid. SUNY Orange has a Refund Policy and any changes may generate an adjustment to my account.

**Signatures Required:**

\_\_\_\_\_  
 Student's Signature Date

\_\_\_\_\_  
 Advisor's Signature Date

**Additional Signatures Required for Late Add(s):** Week 2: Faculty/Department Chairperson Signatures Required. After Week 2: Faculty/Department Chairperson/Associate Vice President Signature Required

\_\_\_\_\_  
 Department Chairperson Signature Date

\_\_\_\_\_  
 Associate Vice President Signature Date

**For Student Services Central Use Only**	
_____ Process Date	_____ Initials