



Add – Drop / Withdrawal / Leave of Absence Form

Date: _____	Term _____
Name: _____ Last First Int	Students adding or dropping classes, students wishing to withdraw entirely from the program, and students wishing to be granted a Leave of Absence (LOA) must submit this completed form to the registrar. The fee for adding and dropping courses after the official add-drop deadline is \$ _____ per course.
ID# _____	

ADD – DROP *(The effective date for changes is the date the Registrar's Office receives this form)*

Add	Drop	Course #	Course Name	Day	Time	# of Days Attended
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____	_____

Students dropping courses receive a pro rata credit for the unused portion of tuition as described in the Enrollment Agreement. This credit amount can either be applied to the following term's tuition or be refunded to the student.

Please note that dropping courses may delay your expected graduation date because the courses are offered in sequence. Future scheduling of dropped courses may conflict with other required classes. Nine Star University of Health Science cannot guarantee future availability of dropped courses.

WITHDRAWAL *(The effective date for changes is the date the Registrar's Office receives this form)*

- Withdraw immediately from all coursework at California University-Silicon Valley
- Withdraw at the end of this term from all coursework at California University-Silicon Valley

Reason: _____

LEAVE OF ABSENCE *(The effective date for changes is the date the Registrar's Office receives this form)*

- Immediate Leave of Absence from California University-Silicon Valley granted.
- A Leave of Absence at the end of this term from California University-Silicon Valley granted

The Student will return to California University-Silicon Valley for the _____ term

Reason: _____

_____	_____
Student's Signature	Date

For Office Use Only

Change Approved Denied

Reason for Denial: _____

Total fees Charged: \$ _____

Credit Card Check _____ Cash

Tuition refund amount: \$ _____

Refund applied to next term Refund given to student

_____	_____
Administrator's Signature	Date