

HAMPTON UNIVERSITY

Course Adjustment Form

To: University Registrar

Semester/Year _____

*Purpose : This form should be used to move a **group** of students from one class to another due to cancellation and /or overcrowding. This form can also be used to allow a student to enter a course after the add/drop period has ended.*

The following students should be moved from _____, _____, _____
CRN Course Prefix Course Name

to _____, _____, _____
CRN Course Prefix Course Name

<u>Name of Student</u> <small>(Please Print)</small>	<u>Student ID</u>	<u>Signature of Student</u>
1. _____	_____	1. _____
2. _____	_____	2. _____
3. _____	_____	3. _____
4. _____	_____	4. _____
5. _____	_____	5. _____
6. _____	_____	6. _____
7. _____	_____	7. _____
8. _____	_____	8. _____
9. _____	_____	9. _____
10. _____	_____	10. _____

Chairperson Signature Date

Dean Signature Date

Chancellor and Provost Signature Date