



Rockland Campus:  
Office of the Registrar  
Alliance Theological Seminary  
350 North Highland Ave  
Nyack, NY 10960

New York City Campus  
Office of the Registrar  
Alliance Theological Seminary  
335 Broadway / 93 Worth St  
New York, NY 10013-3904

## CHANGE OF REGISTRATION FORM (ADD/DROP)

Name \_\_\_\_\_ Date \_\_\_\_\_

Student ID# or Social Security # \_\_\_\_\_

Semester / Year of Change \_\_\_\_\_

- All requests for changes must have your advisor's approval before they will be considered.
- A class that is dropped after the course change (add/drop) period is over will be considered a withdrawal, and will be so noted on the student's transcript. Tuition refunds will be issued on a percentage basis only.

Change (Add, Drop, Withdraw, Audit)	Course#	Course Title	Credits
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

***I agree to pay any charges incurred by the changes indicated above for adding, dropping, and/or withdrawing from classes. I understand it is my responsibility to be informed of ATS/AGSC registration & financial policies, and to comply with those policies.***

Student Signature \_\_\_\_\_

Advisor Signature \_\_\_\_\_

FOR OFFICE USE ONLY
DATE RECEIVED _____ AMOUNT OF REFUND GIVEN \$ _____