

## Return your completed form to:

E-Mail: <a href="mailto:outreach@uccs.edu">outreach@uccs.edu</a>
 Mail: UCCS Academic Outreach
 1420 Austin Bluffs Parkway
 Colorado Springs, CO 80918

Questions: 719-255-3498 <u>www.uccs.edu/outreach</u>

## Add/ Drop/ Withdrawal Request Form

Year	emester: Spring Summer Fall Student ID #		Email Address			Daytime Phone	
Last Name	First Name	Middle Name		Former Name, if applicab	le	Date of Birth	
ADD	I wish to ADD the following course(s):	1					
(\$25 late fee charged if	ADD COURSE 5 Subject/Number/Section (ex: MATH 1050-701) (ex.		s #	Course Start Date	Instructor Permission (if past the course deadline/census date) Signature:		
past course census date)					Signature:		
A	fte After you receive confirmation of your course	registration:	I.		l		
	PAYMENT: UCCS Student Portal ***PREFERRED	***					
Payment Options	Go to <a href="https://www.uccs.edu/~portal">www.uccs.edu/~portal</a> Sign in to your UCCS student portal Click on "Student Financials (Bursar)" Click on "Pay Your Bill" Please note: All credit card payments will incur a 2.75% credit card processing fee that was appear as a separate charge on your credit card statement						
DROP	I wish to DROP/WITHDRAW from the following	course (If past the course o	ensus date, a gro	ade of 'W' will be reco	orded on your tra	nnscript):	
or WITHDRAW	DROP COURSE Subject/Number/Section (ex: MATH 1050-701)	5 Dig	it Class #	Last Date Attended	Instructor Peri	mission se deadline/census date)	
(if request is past					Signature:		
census date)	Have you received an award from the UCCS Financial Aid Office? No Yes		Are you receiving benefits from VA? No Yes		Was your tuition paid by a third party? No Yes		
Required Signature	I understand that it is my responsibility to kr responsibility for each add/drop/withdrawa registration after the course Census Date wil tuition refund.	I. Changes are not official (	intil form is com	plete and received by course drop/withdra	the Academic O	utreach office. Any	