Drop/Add Form

Drop/Add Procedures for Dell Medical School

After an academic schedule has been complete, a student may request to drop or add a course. In order to do so, the student must:

1. Submit the Drop/Add Form to the course scheduler at least 30 days in advance showing which courses to drop and/or add.
   a. The form may be submitted by paper or emailed to the scheduler.
   b. The 30-day requirement may be waived if there is an unexpected and significant life change. A late drop or add must be approved by the Course Contact, the Scheduler, and either the Society Academic Advisor or the Associate Dean for Student Affairs.

2. Any change is contingent on course minimums and maximums.
   a. A student may not drop a course if it places enrollment at less than the course minimum (unless obtaining a waiver as in 1.b.).
   b. A student may not add a course if it places enrollment at more than the course maximum.

3. A student may not drop a course in the MS-2 or MS-3 year that would result in an incomplete graduation path. Any request to drop a required clerkship or clinical course must include the request to add that required clerkship within a timely fashion. The scheduler will determine if the reschedule is in a timely fashion so as to not jeopardize academic progress.

4. No “paired requests” are permitted (i.e. 2 students agreeing to swap). This is not to diminish or restrict your options; it is to ensure that any slot that is opened by one student is reasonably available to all other students in the class.

5. If a request isn’t able to be completed due to course minimum and maximums, the request will remain open for a minimum of 4 weeks, or until the 30-day deadline for the first rotation block of the request, should additional drop/add requests be completed by other students.

6. If a student wishes to request a specific rotation with a clerkship (e.g. a cardiology rotation within the internal clerkship), the student may request that from the clerkship coordinator at least 30 days in advance. Efforts will be made to accommodate these requests, but it cannot be guaranteed that all requests will be honored.

Name: _______________________________ EID: __________________________

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<th>Circle One</th>
<th>Course Title</th>
<th>Begin Date</th>
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Signature: ___________________________________________ Date: ________________

FOR OFFICE USE ONLY

Received by: _________________________________
Date: _________________________________

Approved  Denied