

ANTIGUA AND BARBUDA

INTERNATIONAL INSTITUTE OF TECHNOLOGY

ADMISSIONS OFFICE

DROP/ADD FORM

Student ID: Enter text. Trimester: Enter text.

Student Name: Enter text.

Mobile Number: Enter text. Email: Enter text.

**Please print the information requested in the boxes below**

**DROP COURSE**

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| --- | --- | --- | --- |
| **CRN****CIS101** | **SEC** **01** | **Course Title****Introduction to Information Technology** | **Reason** |
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**ADD COURSE**

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| --- | --- | --- | --- | --- | --- |
| **CRN****CIS101** | **SEC** **01** | **Course Title****Introduction to Information Technology** | **# Of Credits** | **Cost PerCredit** | **Total Cost** |
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| **Total** |  |  |

Click or tap here to enter text. Click or tap here to enter text.

Student Signature Date

Click or tap here to enter text. Click or tap here to enter text.

Bursar’s Signature Date

Click or tap here to enter text. Click or tap here to enter text.

Registrar’s Signature Date

Click or tap here to enter text. Click or tap here to enter text.

Department Head Signature Date