Henry Ford Community College
Registration & Add/Drop Form

Semester Year _____
❑ Fall ❑ Spring
❑ Winter ❑ Summer

Please Print

Last Name	First Name	Middle Initial

Required for Residency

Street Address	City	State	ZIP Code

P.O. Box (If applicable)	Telephone Number ( )	Work Number ( )

Birth Date / /	Student ID Number (or Social Security Number)	E-Mail Address

You are responsible for your bill. If you are not going to attend your course(s) you **must** officially drop the course(s) for which you are enrolled. Students should regularly use WebAdvisor to monitor their academic success, financial aid awarding, and account information.

Select One		Course Letters	Course Number	Section Number	Course Title	Credit Hours
Add	Drop					

INSTRUCTOR USE ONLY	
CODE	SIGN

Date Processed	Counselor Advisor Initials	Staff Initials

I assume responsibility for any implications dropping a class(es) may have on my financial aid status (if I have been or will be accepting financial aid).

Date:_____ Student Signature:_____

W = Waive Prereq.
I = Increase Capacity
L = Late Enrollment
T = OK Time Conflict
P = Permission Granted

03/2010