ADD/DROP FORM

CSU Bakersfield
Extended Education and Global Outreach

9001 Stockdale Highway – 30BDC
Bakersfield, California 93313

661.654.2441 | 661.654.2447 (f)
extended.csub.edu

NAME: _____ CSUB ID#: _____

EMAIL: _____ PHONE: _____

TERM: ☐ Fall ☐ Spring ☐ Summer ☐ Winter YEAR: _____ YYYY

LEVEL: ☐ Undergraduate ☐ Graduate ☐ Extension

SIGNATURES/COMMENTS *(If Required)*						
Course Number	**Course Department & Number**	**Units**	**Check Add**	**Check Drop**	**Instructor's Name Printed**	**Approvals, Instructor/Department Signatures, Comments**
Example: 82984	*COMM 3000*	*3*	✓		*Dr. D. Simmons*	
			☐	☐		
			☐	☐		
			☐	☐		
			☐	☐		
			☐	☐		

I am aware of the conditions of this add/drop transaction including any effects on my academic progress, records, and fees.

I agree to abide by the academic, payment & refund policies governing these courses as printed in the CSUB Catalog. If my payment by credit card, check, or financial aid is not paid by the bank, I am still responsible for all course fees. I authorize CSUB's Extended Education and Global Outreach (EEGO) to change my record, if necessary, to reflect the above information.

SIGNATURE: _____ DATE: _____

FOR OFFICE USE ONLY (INITIAL AND DATE)

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Nondiscrimination Policy
EEGO does not discriminate on the basis of race, color, national origin, sex, physical handicap, or sexual orientation in the educational programs or activities it conducts. Students admitted with physical, perceptual or learning disabilities will be given necessary accommodations provided that their disability has been verified by the CSUB Office of Services for Students with Disabilities (661-654-3360).