

# Course Adjustment Form

## Questrom School of Business - Graduate



Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

BU ID: \_\_\_\_\_ Date: \_\_\_\_\_ Email: \_\_\_\_\_

Semester: \_\_\_\_\_ Year: \_\_\_\_\_ College of Registration:  GSM  Humphrey Fellows  Other: \_\_\_\_\_

**The Graduate Programs Office must receive this form within 4 business days of Instructor's Signature.**

**ADD a course:** Please use this form for those classes requiring instructor's permission and those that you are unable to register for on WebReg.

Course Department: \_\_\_\_\_ Number: \_\_\_\_\_ Section: \_\_\_\_\_ Credits: \_\_\_\_\_ Instructor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Course Department: \_\_\_\_\_ Number: \_\_\_\_\_ Section: \_\_\_\_\_ Credits: \_\_\_\_\_ Instructor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Course Department: \_\_\_\_\_ Number: \_\_\_\_\_ Section: \_\_\_\_\_ Credits: \_\_\_\_\_ Instructor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Course Department: \_\_\_\_\_ Number: \_\_\_\_\_ Section: \_\_\_\_\_ Credits: \_\_\_\_\_ Instructor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**DROP a course:**

Course Department: \_\_\_\_\_ Number: \_\_\_\_\_ Section: \_\_\_\_\_

Course Department: \_\_\_\_\_ Number: \_\_\_\_\_ Section: \_\_\_\_\_

Classes may be dropped using WebReg until the final day to drop with a 'W'. Please be aware that dropped courses may appear on your permanent record and you may receive a 'W' grade. Please see the Drop Schedule for further information. If you wish to drop all of your courses (down to zero credits) you cannot use this form and must follow the University Withdrawal Procedure.

**SECTION Change:**

Course Department: \_\_\_\_\_ Number: \_\_\_\_\_ From Section: \_\_\_\_\_ To Section: \_\_\_\_\_ Instructor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Grade/Audit Change:**

Change to **AUDIT**

Course Department: \_\_\_\_\_ Number: \_\_\_\_\_ Section: \_\_\_\_\_  Change to **GRADE** Instructor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***I am aware that the above actions may affect my academic record, my financial charges, financial aid and scholarships.***

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**This form must be signed and dated.** Graduate Questrom courses changes can only be processed by the Graduate Academic & Career Development Center, 595 Commonwealth Ave, Ste 115, Boston, MA 02215. Phone: 617-353-2673 Fax: 617-353-9498.

**Always check the Student Link to verify your schedule.**