Revised 5/23/16



## Leech Lake Tribal College Add/Drop Form

Student Name:		Stude	ent ID:	Date:	Date://	
Phone Number:	Semester/Year: ☐ FA ☐ SP ☐ SU					
DROP Dept ID	Course Title	Cr	Instructor	Days	Times	
ADD Dept ID	Course Title	Cr	Instructor	Days	Times	
Student Signature:			Date	:		
Advisor Signature:			Date	:	·	
	e has a 5-day Add/Drop period. T					
COLLEGE COLLEGE		Leech Lake Tribal College Add/Drop Form				
Student Name:		Student ID:		Date://		
Phone Number:	Semeste	er/Year:	□ FA □	SP [	] su	
DROP Dept ID	Course Title	Cr	Instructor	Days	Times	
ADD Dept ID	Course Title	Cr	Instructor	Days	Times	
Student Signature:			Date	:		
Advisor Signature:			Date	:		

The Leech Lake Tribal College has a 5-day Add/Drop period. Tuition will not be refunded for courses dropped after the 5<sup>th</sup> day.