unisel
UNIVERSITI SELANGOR

ADD/DROP COURSE FORM

* please get all the required approval before submit to the respective office / department

Name :

Matric number :

Mobile phone number : —

Faculty :

Programme :

Academic session (current) :

Name of academic advisor :

Total credit taken for this semester : Before After

ADD COURSE

No.	Code	Course	*R	Lecturer's signature
1				
2				
3				
4				
5				
6				
7				

Please ensure the course code filled is the same as the previous course taken or equivalent to the previous course

***R** - *Repeated course*

DROP COURSE

No.	Code	Course	*R	Lecturer's signature
1				
2				
3				
4				
5				
6				
7				

Students who request to drop course after the permitted week must get an approval from concerned lecturer

***R** - *Repeated course*

Notes:

3 Please tick √ at the ***R** box to indicate as repeated course.
4 Student with **CGPA less than 2.00** is only permitted to register maximum of twelve (**12) credit hour.**
5 Course add / drop for **long semester** is permitted on first and second week of lecture (*without charges*).
6 Drop course for **long semester** is permitted within **nine weeks** from the lecture begin (*Penalty paid at the Finance Office*).
7 Student must register minimum of **twelve (12)** credit hour for **long semester** (*except for those whom in last semester or Practical Training*).
8 Student registering more than **eighteen (18)** credit hour for **long semester** should get an approval from **Dean**.
9 Course add / drop for **short semester** is permitted on first week of lecture (*without charges*).
10 Drop course for **short semester** is permitted within **four weeks** from the lecture began *(Penalty paid at the Finance Office)*.
11 Student must register with minimum of **three (3)** credit hour and maximum **nine (9)** credit hour for **short semester.**
12 Student registering more than **nine** credit hours for **short semester** should get an approval from **Dean.**
13 Incomplete application/or application received after the closing date will be rejected.

Student declaration
I have read and admit the information stated
Signature:
Date :

Faculty (Head of Programme)
Name and official stamp :
Date :

Dean
**If applicable*

Name and official stamp :
Date :

Finance office
Name and official stamp :
Date :

EXAMINATION AND COURSE EVALUATION UNIT

Action taken (note): _____

_____

Offical Stamp and Date:

Name and Signature :