

Midwestern Baptist Theological Seminary

Course Schedule Change Form

\$20.00 Schedule Change Fee Required (after courses begin)

Registrar's Office • Phone # (816) 414-3713 • Fax # (816) 414-3705 • Email registrar@mbts.edu

Term & Year: _____ Major: _____ Last 5 digits of Student ID # _____
(FA-, JAN-, SP-, SU-/Year)

Name _____ Email Address _____
(Please print: Last name, First name, Middle Initial)

Check box if withdrawing from all courses Phone Number _____

Check box if you are an International Student and obtain approval for drops from the ISS Coordinator: _____

Check box if receiving any financial aid and obtain required approval from the Financial Aid Office: _____

Circle One	Course Department & Number	Section & Type	Course Title	Hours	Circle One
Add or Drop					Credit or Audit
Add or Drop					Credit or Audit
Add or Drop					Credit or Audit
Add or Drop					Credit or Audit
Add or Drop					Credit or Audit
Add or Drop					Credit or Audit

For the 16 week semester: The last day to withdraw without academic penalty is November 1st for the Fall semester and April 1st for the Spring semester. Other courses (Online, CCC, etc.): Please refer to the catalog for the refund schedule or under Tuition and fees on the website at www.mbts.edu.

The student is responsible to complete all degree requirements as specified in the catalog in an orderly and timely manner.

Student Signature _____ Date _____

	Credit	Audit
Hours Before Change		
Hours After Change		

Please explain why you are dropping your course/courses _____

For Office Use Only: Received (Date/By) _____ Entered in CAMS (Date/By) _____
 Blackboard Access (Date/By) _____ Sent to Financial Aid (Date/By) _____
 Last Date of Attendance _____