

Design Services

Proof Verification

Client _____ Date _____

Job Name _____

Job No _____

Proof No **1** **2** **3** **4** Other _____

1

Please follow these instructions

2

Check appropriate box (only 1)

Please Read

Please check this proof for incorrect spelling, type size, style and position.
No job will be released to print without signature and approval.

Please mark all changes clearly on the proof then check appropriate box below, sign and fax back to number checked at bottom.

- Print as is - No corrections.
- Make correction as indicated and print - Additional proof not necessary.
- Make correction as indicated and prepare another:
 - PDF Proof and email it to me.
 - Paper Proof and:
 - Call me for pick up. My ext: _____
 - Send it Interdepartmental Mail.

Questions regarding this Proof, please call AJ Newell at: 540.654.1934

3

Please sign, date and return

X

Signature

Date

Design Services cannot assume liability for errors on an OK'd proof.

4

Fax form back

Fax 540.654.1933

SUMMER SESSION COURSE CHANGE

Official Use Only
Date: _____

Time: _____

NAME _____ ID # _____ DATE _____

PERMANENT MAILING ADDRESS _____

SUMMER SESSION ADDRESS _____

DAYTIME TELEPHONE NO. _____ EVENING TELEPHONE NO. _____

EMAIL ADDRESS _____

If you are a residential student dropping all of your courses, indicate on what date you will vacate your room _____

REVISED MARCH 2007

SECTION I: COURSES TO BE ADDED

Complete this section with the courses to be added. Note the appropriate term in the "TERM" column. Write the course credits to be taken for A/F or pass/fail credit in the appropriate columns. Indicate in the "REP CRS" column if a course is to be repeated and needs approval.

TERM	CRN				DISC				CRS NO.				SUF		SECT		ABBR. CRS. TITLE			CHANGE GRADE TYPE TO		REP CRS	REPEAT/OVERLD APPROVAL	
																				A/F	P/F S/U			

Total credits registered for May/June term including above course add _____. Total credits registered for June/July term including above course add _____.

SECTION II: COURSES TO BE DROPPED

Complete this section with the courses to be dropped. Note the appropriate term in the "TERM" column.

TERM	CRN				DISC				CRS NO.				SUF		SECT		ABBR. CRS. TITLE

SECTION III: A/F OR PASS/FAIL GRADE TYPE CHANGES

Complete this section for changes to the registered grade type of a course. Note the appropriate term in the "TERM" column.

TERM	CRN				DISC				CRS NO.				SUF		SECT		ABBR. CRS. TITLE			CHANGE GRADE TYPE TO				
																				A/F	P/F S/U			

INSTRUCTIONS: Please refer to the appropriate instructions and dates. No action is considered official until this form is completed and delivered to the Office of the Registrar, GW 215. The official date of the change is the date this document is received in the Office of the Registrar. If you are receiving financial aid, you must check your status with the Office of Financial Aid, Lee 301, before you add or drop courses. Please attach your ID card if you are a visiting student for the Summer Session and are withdrawing from the University.

Student Signature (All forms must be signed)