

Fax: 202-452-1970 / Phone: 1-800-847-3330

Add/Drop Form

Please clearly type or print with a ball point pen and fax to: 202-452-1970
 or mail to: Johns Hopkins University, ATTN: Add/Drop, 1717 Massachusetts Ave NW, Suite 101, Washington, DC 20036

Print Name	Last	First	Middle	____/____/____ Date of Change
Street	City			State Zip
E-mail address	Indicate Term: Fall 2009 <input type="checkbox"/> Spring 2010 <input type="checkbox"/> Summer 2010 <input type="checkbox"/>			____/____/____ Social Security Number (last 4)

	Dept.	Course	Sect.	Descriptive Course Title	Credit	Audit	Tuition And Lab Fees
Adds	1.						\$
	2.						\$
	3.						\$
Drops	1.						\$
	2.						\$
	3.						\$

Student Signature: _____	Date: _____	Check Method(s) of Payment:	
		<input type="checkbox"/> Check Amount	<input type="checkbox"/> JHU Financial Aid
		<input type="checkbox"/> Employer Contract	<input type="checkbox"/> JHU Remission
		<input type="checkbox"/> Credit Card	
		<i>(If you wish to pay by credit card, sign into your student account at http://isis.jhu.edu and manage your billing under the "billing" section)</i>	
OFFICE USE ONLY 12110ES13MM25CW	% of refund:	<i>(Contract stating your new courses must accompany form)</i>	
Processed by:	Date: _____		

Please allow 1-3 business days for processing. Please visit ISIS student self-service (<http://isis.jhu.edu>) to confirm your enrollment.