

CHANGE IN REGISTRATION

TERM	
DATE	

Office of the Registrar • 36600 Schoolcraft Road • Livonia, MI 48150-1176 (734)432-5400 • Fax (734)432-5405 • registrar@madonna.edu

ID NUMBER					NAME ((first)			(middle)		
Dept		Course #		Section	Lab	Audit	Sem Hrs	Add	Drop	Withdraw	Last day of attendance*	Comments/Reasons	
*The last date you engaged in an academically-related activity in your course(s). The last activity may include, but is not limited to: Class attendance. Turning in a class assignment.					I understand that by signing this form that I, the student, am legally obligated to pay all tuition and fees. In the event of default, the University may refer my account to a credit reporting agency, a collection agency, and/or initiate legal action to recover any outstanding debt. I understand that I am also responsible for the costs of collection including interest, penalties, collection agency fees, court costs and attorney fees.								
 Taking an exam, tutorial or computer-assisted instruction. Attending a study group that is assigned by the institution. 					☐ I understand that by adding, dropping, and/or withdrawing from the above classes I may affect my present and/or future financial aid, including any type of federal, state, or institutional aid administered by the Madonna University Financial Aid Office.								
Participating in an online discussion about the course. The form of the standard of							Signature						
 Initiating contact with a faculty member regarding the course material. 							araing	Псн	Check this box if you are dropping/withdrawing due to COVID				

Last Modified: 3/15/2022