

GRADUATE AND CONTINUING EDUCATION

SUMMER 2024

ADD/DROP FORM

Fax:508-929-8100 | Email: dgce@worchester.edu



WORCESTER
STATE
UNIVERSITY

Add/drop deadline for Summer 1 is 5/28/24, Full Summer is 6/3/24, and Summer 2 is 7/23/24.

Please fax to 508-929-8100 or email to dgce@worchester.edu

LAST NAME _____ FIRST NAME _____

DATE OF BIRTH _____ STUDENT ID # OR S.S. _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE NUMBER (_____) _____ CELL HOME WORK

PLEASE **ADD** THE COURSE(S) BELOW

Semester*	Course #	Section	Course Title	Day	Time

* _____ Date _____

*My signature above certifies that I have the pre-requisites to be added into the above course(s)

Pre-requisite taken at: _____ (please indicate name of institution)

PLEASE **DROP** THE COURSE(S) BELOW

Semester*	Course #	Section	Course Title	Day	Time

Student Signature _____ Date _____

Method of Payment

Payment is due at time of registration. Please complete this section or attach a check.

Student's Name _____

Check, payable to **Worcester State University** Financial Aid* Credit/Debit

*Requires bursar confirmation in writing

Cardholder's Name _____ Cardholder's Signature _____

The credit card processor ACI will be charging a 2.2% non refundable service fee for all credit/debit card transactions. This fee will appear as a separate charge on your card statement.

_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|

Credit/Debit Card Number

_____|_____|_____|_____|

Expiration Date

_____|_____|_____|

3 or 4 digit security code