KERNEL UNIVERSITY

905 South Euclid St STE 213 Fullerton, CA 92832. www.kernel.edu
Tel.714-995-9988 Fax.714-995-9989 info@kernel.edu

COURSE ADD AND DROP FORM

1. Personal Information

Student Name:_____ Student ID:_____

Address:_____

Phone:_____ Email:_____

2. Program of Study

□ Bachelor of Theology (B.Th)   □ Master of Divinity (M.Div)   □ Doctor of Ministry (D.Min)

□ Business Administration (BSBA)

3. Applying for

□ Spring   □ Summer   □ Fall   □ Winter   Year (20   )

ADD CLASS

Course No.	Day of the week	Course Title	Instructor	Unit

DROP CLASS

Course No.	Day of the week	Course Title	Instructor	Unit

This form may only be used for Add/Drop made prior to the 3rd week of the term for Seminary students.

Student Signature:_____ Date:_____

Academic Dean or
Director Signature:_____ Date:_____

Dir. Adm. Reg. Signature:_____ Date:_____

Revised 03/29/2022