

UNIVERSITY OF SAN DIEGO SCHOOL OF LAW

Course Change Form

Last Name: _____ First Name: _____ M.I.: _____ Date: _____

I.D. No. _____ Changing courses for (circle one): Spring Summer Fall Year: _____

Degree Program: ___J.D. ___Visitor ___LL.M. Bus ___LL.M. Comp. ___LL.M. Gen. ___LL.M. Int'l. ___LL.M. Tax

J.D. Class: ___1 ___2 ___3 ___4 J.D. Division: ___Day ___Evening

Will complete degree at conclusion of (circle one): Spring Summer Fall Year: _____

<u>Action</u>	<u>Course/Section Code</u>	<u>Course Title</u>	<u>Professor</u>	<u>Cr.</u>	<u>Div.</u>
(A=Add) (U=Audit) (W=Withdraw)				(D=Day) (E=Eve)	
_____	LW _____	_____	_____	_____	_____
_____	LW _____	_____	_____	_____	_____
_____	LW _____	_____	_____	_____	_____
_____	LW _____	_____	_____	_____	_____
_____	LW _____	_____	_____	_____	_____
_____	LW _____	_____	_____	_____	_____

DESIRED U.S.D. LAW COURSES CREDIT LOAD* _____

If you are enrolling in units elsewhere in the University, do not include them in your Desired Credit Load, but indicate the number here: _____

**Your billing and financial aid are based on Desired Credit Load.*

***** **OFFICE USE ONLY** *****

Tuition: _____ No Change Des. Cr. Load _____ Increased Credits - Tuition Assessment Prior _____ Decreased Credits - Tuition Credit Current _____ Decreased Credits - Past Refund Period	Any request for exceptions to the refund deadlines must be made in writing, with any supporting documentation, to the Director of Budget and Administration.
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(Send Copy to Financial Aid if Increased Credits or Decreased Credits Are Indicated, Even If There Is No Refund.)