

**Doctor of Pharmacy Degree Program**

Addendum Application

**Course Schedule Change**

REQUIRED IF APPLICABLE

<b>APPLICANT ID</b>				
LAST NAME	FIRST NAME	EMAIL ADDRESS	PHARMCAS ID	DATE

Complete this form if the schedule of classes for the current academic year that you provided in your PharmCAS application changes.

**1. Briefly explain why your course schedule has changed:**

**2. Did you complete an Academic Update on PharmCAS between December 15 and February 15?      Yes      No**

**3. List all course changes below, whether or not it is UCSF-required prerequisite course work.**

- For each course, list the term, year, college, department, course number, and course title. See the examples below.
- Please use the notes section for any comments.
- Provide this information for all terms (fall, winter, spring, summer), even if you are submitting this form after a term has ended.
- If you are concurrently enrolled at more than one school during a term, list all schools and identify at which school each course will be dropped/taken. See the example. Use multiple forms if necessary.

**4. Submit the form.**

- Keep a copy of the completed form for your records.
- E-mail the completed form to [joel.gonzales@ucsf.edu](mailto:joel.gonzales@ucsf.edu).

Term & Year	College	Dept & Course #	Course Title	Quarter Units	Add	Drop	Notes
Spring 2020	UCLA	COM 102	Communications	3		X	Not required by UCSF
Spring 2020	Santa Monica JC	SPCH 101	Public Speaking	4.5	X		Required by UCSF

Failure to notify our office of schedule changes can result in the cancellation of your application.

FOR ADMINISTRATIVE USE ONLY:

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