

Student's Name: _____ Date: _____
FIRST MIDDLE LAST

Student ID: _____ DOB: ____/____/____ Semester/Yr: _____
MONTH DAY YEAR

How many credit hours are you currently enrolled in? _____

How many credit hours will you be enrolled in after this form is processed? _____

Are you dropping a VCT course? YES NO

NOTE: If course(s) being dropped/added includes a lab, it must also be listed below.

DROP

COURSE	ID	SEC	TERM/YR	DESCRIPTION	INSTRUCTOR'S NAME
ENGL	1301	550	2016 FA	COMP I	Fletcher

ADD

COURSE	ID	SEC	TERM/YR	DESCRIPTION	INSTRUCTOR'S NAME
ENGL	1301	550	2016 FA	COMP I	Fletcher

STUDENT SIGNATURE: _____ DATE: _____

RECEIVED
DATE: _____
BY: _____
TERM: _____

PROCESSED
DATE: _____
BY: _____