

PETITION TO CHANGE COURSE/SECTION

FALL___ SPRING___ SUMMER___ YEAR: 20____

STUDENT ID NUMBER:
DATE:

COURSE TO BE	CRN	SUBJECT	COURSE	DAYS	TIME	INSTRUCTOR'S SIGNATURE*
DROPPED:						
DROITED.						

COURSE TO BE	CRN	SUBJECT	COURSE	DAYS	TIME	INSTRUCTOR'S SIGNATURE*
ADDED:						

DEPARTMENT CHAIR OR DESIGNEE SIGNATURE:	A DEPARTMENT CHA THIS FORM OR <u>IT IS N</u>	IR/DESIGNEE MUST SIGN NOT VALID
*Note to Faculty: After the official deadline to add a class has passed, a student may change a course or section only if they are:		
1. Changing to a higher or lower level in sequential courses.	Received By: I	Date:
Changing to a different section of the same course and must be submitted no later than the last day to submit a	Processed By:	Date:

late add published in the Instructional Calendar.