



DUAL CREDIT ADD/DROP REQUEST FORM

_____ MI
Last Name **First**

DROP **ADD** **MOVE SECTIONS**

_____ Semester _____
Student's ID # or SS#

Circle reason for Withdrawal:

DROP COURSE(S)				ADD COURSE(S)				
Subject	Number	Section	Credits	Subject	Number	Section	Credits	

- Academic Difficulties Excessive Absences Transfer
- Financial Difficulties Schedule Conflicts w/Work Death of family Member
- Severe Illness Block Withdrawal Technical

The official effective notification date for any add, drop or withdrawal is the date entered below by the Admissions/Registrar's Office.

Please keep a copy of the form until final grades are posted and/or appropriate refund is received.

The following signatures are required for all transactions:

Student Signature: _____
Date

High School Official: _____
Date

SWTJC Official: _____
Date

FOR OFFICE USE ONLY:

_____ Date Processed

_____ Admissions/Registrar's Office Signature