

EVEN EXCHANGE ENROLLMENT REQUEST

| PRINT Student First Name | Last Name | Student ID Number | Phone | Semester | |
|---|--|---|---|---|--|
| to ensure that required signatures/a enrollment requests are subject to a | pprovals are included, payn pproval; the student is resp | cords staff to adjust enrollment as re nent is made (if applicable), and this onsible to check their account in my\ applicable), and to make payment acc | form is submitted by o VNC to determine if the | deadlines. All ne enrollment reque: | |
| Student Signature | | Date | | | |
| Requests to add full clas | ses will not be prod | essed without consent fro | om the applicat | ole Division. | |
| If enrolled in a math class that is permission is not required until the | | ed, use this form for an exchange emester. | of different sections | s. Instructor | |
| | Ev | en Exchange | | | |
| Instructor signature or attached Courses requested to both drop greater than the number of cou Dropped classes approved for Deadline to submit this form for Tuesday. Note: Requests to ev | email approval required for and add for even exchang rse units to drop. even exchange will be remo even exchange is the Frida en exchange courses to mo | the semester, only for full-to r course(s) to add; form must be sub- r e must be listed. The number of units oved from a student transcript. By of the second week of the semester ove to a higher or lower level within the course must be a prerequisite to the | nitted within 5 days of s requesting to add me er or Monday if the se e same discipline will | ust be equal to or mester began on a be accepted until th | |
| Course(s) to add: 1) Course Registration Number of the class full? Yes No. | (i.e. 32876) : NOTE: If the class is fu | Prefix/Number (i.e. BUS 10 ull, request will not be processed | 1) : □ unless Division has | Credit ☐ Audit granted consent. | |
| Instructor Name (Print): | Instru | ctor Signature: | | Date: | |
| If applicable, Division Signature: | | | Date: | | |
| 2) Course Registration Number Is the class full? Yes No | (i.e. 32876) : NOTE: If the class is f | Prefix/Number (i.e. BUS 10 ull, request will not be processed | 1) : □ unless Division has | r Credit | |
| Instructor Name (Print): | Instru | ctor Signature: | | Date: | |
| If applicable, Division Signature: | | | Date: | | |
| 3) Course Registration Number Is the class full? Yes No | (i.e. 32876) : NOTE: If the class is f | Prefix/Number (i.e. BUS 10 ull, request will not be processed | 1) : □ unless Division has | Credit Audit sgranted consent. | |
| Instructor Name (Print): | Instru | ctor Signature: | | Date: | |
| If applicable, Division Signature: | pplicable, Division Signature: Date: | | | | |
| Course(s) to drop: 1) Course Number: P | refix/Number: | | | | |
| 2) Course Number: P | refix/Number: | _ | | | |

3) Course Number: _____ Prefix/Number: ____