

School District: _____

SSN: XXX-XX-_____

Dual Enrollment DROP/ADD FORM

Schedule changes for the fall semester are due to the Registrar's Office no later than November 30th. Schedule changes for the spring semester are due no later than February 15th.

Schedule changes received after the deadline cannot be processed.

Last Name _____ First Name _____
Please Print Clearly Please Print Clearly

COURSES TO BE DROPPED

- I/We understand that the student cannot be re-enrolled into dropped courses in the future. The decision to drop courses is irrevocable.*

COURSE/DEPT	COURSE #	CREDITS	GUIDANCE SIGNATURE	DATE

Total credits dropped: _____

COURSES TO BE ADDED

COURSE/DEPT	COURSE #	CREDITS	GUIDANCE SIGNATURE	DATE

Total credits added: _____

- I/We understand that I/We are responsible for tuition costs resulting from the schedule changes detailed above and that transfer of credit cannot be guaranteed by the School District or Keystone College.*
- I/We further understand that credit will not be granted if the student earns a grade of less than C and charges for those courses will remain due and payable.*

STUDENT'S SIGNATURE: _____ DATE: _____

PARENT'S SIGNATURE: _____ DATE: _____

REGISTRAR'S OFFICE: _____ DATE: _____