Uvalde ▮ Del Rio ▮ Eagle Pass ▮ Crystal City ▮ Pearsall

SWTJC

Southwest Texas Junior College

OFFICE OF ADMISSIONS/REGISTRAR
COURSE SCHEDULE CHANGE

Last Name **First** **MI**

Student's ID # or SS#_____ **Semester**_____

☐ **DROP** ☐ **ADD**

☐ **COMPLETE WITHDRAWAL**

Reason for Withdrawals:

☐ Academic Difficulties ☐ Excessive Absences ☐ Transfer

☐ Financial Difficulties ☐ Schedule Conflicts w/Work ☐ Military Duty

☐ Severe Illness ☐ Block Withdrawal ☐ Death of Family Member

☐ Dual Credit Classes

DROP COURSE(S)				ADD COURSE(S)				
Subject	Number	Section	Credits	Subject	Number	Section	Credits	Instr. Init.

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.

Student's Signature **Date**

The following signature is required for all transactions:

Counselor/Advisor: _____
Date

Instructor Signature:_____
Date

For proper advisement please see the following departments:
(If dropping all courses all signatures required)

☐ Business Office:_____
Date

☐ Financial Aid Sponsor/VA:_____
Date

☐ Library:_____
Date

☐ Bookstore:_____
Date

☐ International Advisor:_____
Date

FOR OFFICE USE ONLY:

_____ _____

Date Processed **Admissions/Registrar's Office Signature**

Reset Print Submit

Rev 11/2012