

Registration Adjustment Form

1. You must obtain the High School Dual Enrollment Contact's signature.
2. If you submit a schedule change (add/drop), please let us know if we should process the request if the new course/section is closed. Otherwise we will process the drop as requested.
3. You should only list a course to be dropped if you are officially registered in it already.
4. TERM: 1= Full Semester, 2 = A mini-semester, 3 = B mini-semester

ADD:

DROP:

Term 1-2-3	Section # (CRN)	Course Prefix & Number	Credit Hours	DE Code Office Use Only	Term 1-2-3	Section # (CRN)	Course Prefix & Number	Credit Hours

KEEP CURRENT SCHEDULE IF NEW REQUEST CAN'T BE PROCESSED.

I ACCEPT FULL RESPONSIBILITY FOR ADDING OR DROPPING COURSES.

Print Name: _____ SJR State Student ID #: X00 _____

Student Signature High School Date

Student's SJR State Email (Required): _____

Dual Enrollment Early Admissions Collegiate High School

High School Dual Enrollment Contact Signature Date/Time

Reason for adjustment: _____