

LISD Students: Return this form to your campus counselor.

Student's Name: _____ Date: _____
FIRST MIDDLE LAST

Student ID: _____ DOB _____ Semester/Yr: _____
MONTH DAY YEAR

How many credit hours are you currently enrolled in? _____

How many credit hours will you be enrolled in after this form is processed? _____

Are you dropping a VCT course? YES NO

NOTE: If course(s) being dropped/added includes a lab, it must also be listed below.

DROP

| COURSE | ID | SEC | TERM/YR | DESCRIPTION | INSTRUCTOR'S NAME |
|--------|----|-----|---------|-------------|-------------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

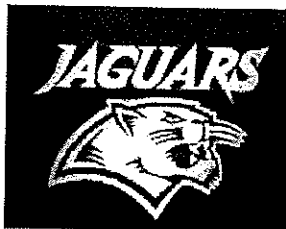
ADD

| COURSE | ID | SEC | TERM/YR | DESCRIPTION | INSTRUCTOR'S NAME |
|--------|----|-----|---------|-------------|-------------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

STUDENT SIGNATURE: _____ DATE: _____

Received by LISD Dual Credit Champion:

Date: _____
 Time: _____



| |
|-------------|
| RECEIVED |
| DATE: _____ |
| BY: _____ |
| TERM: _____ |

| |
|-------------|
| PROCESSED |
| DATE: _____ |
| BY: _____ |

North Central Texas College does not discriminate on the basis of race, color, religion, sex, gender, national origin, age, disability or veteran status. With a few exceptions, state law gives the student the following rights regarding the information collected by NCTC: the student has the right to request to be informed about the information, the right to receive the information, and the right to correct information that is incorrect. Information on this document is subject to change due to policy changes by Federal, State, or NCTC.