Southern West Virginia Community and Technical College
OFFICE OF STUDENT RECORDS
CHANGE OF SCHEDULE FORM

INSTRUCTIONS

1. SECURE ADVISOR'S SIGNATURE.
2. SECURE INSTRUCTOR(S) SIGNATURE(S).
3. PRESENT THE COMPLETED FORM TO RECORDS.

NAME ___________________ LAST ___________ FIRST ___________ MIDDLE ___________ (MAIDEN) ___________

SOCIAL SECURITY NUMBER __________________________________________________________

STUDENT SIGNATURE _____________________________________________________________

ADVISOR'S SIGNATURE ____________________________________________________________

RECORDS SIGNATURE _____________________________________________________________

ORIGINAL HOURS REGISTERED FOR _________________________________________________

NUMBER OF HOURS (ADDITION/DROPPING/WITHDRAWING) ________________________________

NEW TOTAL HOURS _______________________________________________________________

INSTRUCTOR: ENTER STUDENTS NAME ON ROLL SHEET.
"INDEX", "COURSE NO." AND "SEC." ON THIS FORM MUST AGREE WITH CLASS ROLL.

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<th>DEPT. NO.</th>
<th>COURSE NO.</th>
<th>SEC. NO.</th>
<th>HRS.</th>
<th>TITLE</th>
<th>ADD</th>
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(CHECK YOUR NUMBERS FOR ACCURACY)

*NOT REQUIRED FOR ADD/DROP