MERCED COLLEGE

Spring ○ Summer ○ Fall ○

Year ____

SCHEDULE REQUEST FORM

Submit completed form to Admissions@mccd.edu

New/Returning Student ○ Continuing Student ○ K-12 Student ○

Student ID#	**Phone Number**	
Last Name	**First Name**	**Middle Initial**
Student Signature **X**	**Date**	

COURSE ADDS-Please make sure form is complete, signed, and dated.

SECTION NO.	COURSE	UNITS	DAY	TIME	BLDG/ROOM	OFFICE USE ONLY – MM = Multiple Measure / OTR = Other Transcript				
EXAMPLE: 10001	ENGL-01A	4	MWF	7-10pm	IAC-122	COUNSELOR SIGNATURE IF PREREQUISITES NOT MET	PLACEMENT OVERRIDE APPROVED USING		INSTRUCTOR'S SIGNATURE TO ADD (IF NEEDED)	DATE OF FIRST ATTENDANCE
							MM ✓	OTR ✓		
STUDENTS ENROLLING IN A LAB CLASS INVOLVING READING, WRITING, MATH, SCIENCE, OR EXERCISE WILL ALSO BE ENROLLED IN A FREE OF CHARGE NON-CREDIT CLASS FOR RECORDKEEPING PURPOSES.										

COURSE DROPS

IT IS THE STUDENT'S RESPONSIBILITY TO DROP ANY CLASS THAT THEY DO NOT INTEND TO COMPLETE. EXCESSIVE DROPS MAY AFFECT ACADEMIC STATUS AND FINANCIAL AID.		☐ **Enter one that applies to reason for dropping courses.**	**OFFICE USE ONLY**
SECTION NO.	**COURSE**		**COUNSELOR SIGNATURE REQUIRED ONLY IF DROPPING GUID-54**
EXAMPLE: 1001	ENGL-01A	1. Attending Another School 2. New Class/Section 3. Major/Program Change 4. Felt Unprepared/Difficult 5. Instructor Issues 6. Textbook/Material Cost 7. Tuition Cost 8. Financial Aid Disbursement 9. Child Care Issues 10. Family (Not Child Care) 11. Legal Obligation 12. Medical Issues 13. Mental Health 14. Lack of Motivation 15. Work Conflict 16. Transportation 17. Declined to State	