WEATHERFORD COLLEGE 1869 | DUAL CREDIT

Schedule Change Request Form

Use this form to request a change to your dual credit schedule after the semester has begun; requests may include adding courses or changing courses or sections. Submission of this form does not guarantee approval, and schedule changes will not be considered after the census date.

Student Information

Student Name: _____WC ID Number:_____

High School: _____

Move From: **Move To:**

Course Prefix/Section Number: _____Course Prefix/Section Number:_____

Course Title: _____Course Title:_____

Instructor: _____ Instructor:_____

Reason for Request:

_____

_____

Acknowledgment

I understand that approval of this request is not guaranteed and is subject to Weatherford College policies, course availability, instructor approval (if required), and applicable deadlines. I further understand that, if approved, I am responsible for obtaining any missed course materials, assignments, and instruction resulting from a late enrollment or schedule change.

Signatures

Student Signature:_____Date:_____

High School Counselor Signature: _____ Date:_____

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Dual Credit Office Use Only
Date Received: _____
Approved Denied
Student Notified By: _____Date:_____