

**To complete paper form:**

1. Student prints this form
2. Student completes top section, CRN, and Course Code portions.
3. Student takes form to instructor(s) and Dean(s) for signatures.
4. Student returns completed form to Registrar's Office in person or scans and emails to gfloyd@highlands.edu



**GEORGIA HIGHLANDS COLLEGE  
REQUEST TO CHANGE SCHEDULE  
AFTER DROP/ADD**

**To complete digital form:**

1. Student fills in top section, CRN and Course Code portions
2. Student saves form and emails to instructor(s) and Dean(s) for signatures
3. Each instructor/Dean signs by typing in correct fields, saves, and sends form back to student
4. Student emails completed form to gfloyd@highlands.edu

The deadline to submit this form for each part of term (full term, 8-week, and 10-week) can be found on the Academic Calendar. The form will be sent to all required offices for review. Students will be notified at their GHC email address if the form was approved and processed or denied once all required offices complete their review.

**TERM:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**NAME:** \_\_\_\_\_ **ID#:** \_\_\_\_\_

**REASON FOR REQUEST:** \_\_\_\_\_

**DO YOU RECEIVE FINANCIAL AID? (CHECK ONE)**                      **YES** \_\_\_\_\_                      **NO** \_\_\_\_\_

**COURSES TO ADD:** Courses previously attending to be reinstated.

CRN#	Course Code	Instructor Signature & Date	Academic Dean Signature & Date

**COURSES TO SWAP:** Course previously attending to be swapped with another section of same course.

	CRN#	Course Code	Instructor Signature & Date	Academic Dean Signature & Date
<b>ADD 1</b>				
<b>DROP 1</b>			<b>Not required</b>	<b>Not required</b>
<b>ADD 2</b>				
<b>DROP 2</b>			<b>Not required</b>	<b>Not required</b>
<b>ADD 3</b>				
<b>DROP 3</b>			<b>Not required</b>	<b>Not required</b>

\*\*\*\*\*REGISTRAR OFFICE USE ONLY\*\*\*\*\*

**REGISTRAR SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_