

NUNEZ COMMUNITY COLLEGE

Course Schedule Request/Approval Form

NAME:	MAJOR:
Last, First, Middle	

SOCIAL SECURITY #:	SEMESTER:
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ADDRESS	
CITY, STATE, ZIP	

EMAIL ADDRESS:	PHONE #:
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Check if New Address New Email Address New Phone Number

Course Prefix & No.	Section No.	Credit Hours	Course Title	Days	Hours	Room

TOTAL HOURS APPROVED FOR THIS STUDENT ON THIS REQUEST FORM: _____

FALL or SPRING schedules containing more than 19 hours require Division Dean's approval.
 SUMMER schedules containing more than 10 hours require Division Dean's approval.

	YES NO (Circle One)	
Cum. GPA	Approval for 19+ hours (Fall/Spring) or 10+ hours (Summer)	Division Dean's Signature

ADVISOR'S NAME: (Print)	DATE
ADVISOR'S SIGNATURE:	

STUDENT MUST FILL OUT THE REQUESTED INFORMATION AND SIGN BELOW.

By signing this form, I acknowledge that I am enrolling in the courses listed above and will be responsible for the tuition and fees. I also understand that **it is my responsibility to OFFICIALLY WITHDRAW or DROP any classes I do not wish to attend.** I am aware that although many Nunez courses transfer to other institutions, it is always the option of the receiving institution to accept a specific course in transfer. I am aware that if I am going to transfer to another institution that at the earliest possible date, I should meet with a counselor or advisor from that college to discuss my intended major and the articulation of courses.

STUDENT'S NAME: (Print)	DATE
STUDENT'S SIGNATURE:	