# *MSU-Great Falls College of Technology*

## *Drop/Add Card for Dual Enrollment or Dual Credit Students*

**NAME**: _____ **ID/SSN**: _____
**LAST** **FIRST**

**DATE OF BIRTH**: _____ **TERM: Fall Spring Summer YEAR**: _____

**DROP**

| Class | Time | Credits | Instructor |
|---|---|---|---|
| | | | |
| | | | |

**** IMPORTANT:** If you are dropping all of or your only class you must fill out a withdrawal/dropping all classes.

**ADD**

| Class | Time | Credits | Instructor | Instr initials |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |

****INSTRUCTOR SIGNATURE MUST BE OBTAINED TO ADD A CLASS THAT HAS ALREADY MET.**

*~ Adding or dropping courses may affect your bill with the college.*
*~ Students in Dual Enrollment or Dual Credit courses will follow the College's official academic year calendar, catalog, policies and procedures.*
*~ There is no guarantee that these courses will be taught or that spaces will be available for high school students.*
*~ Students will need to provide placement test scores if requesting enrollment in English, math or biology courses.*

_____
(Student Signature) (Date)

_____
(Parent/Guardian signature if student is under 18 years of age) (Date)

_____
(High school counselor/principal signature) (Date)

| FOR OFFICE USE ONLY | |
|---|---|
| Date received: | Processed by: |

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