



ADD / DROP FORM

Select Term: Fall Spring Summer Year: _____

Student Name: _____ Student ID Number: _____

Email: _____ Phone Number: _____

Address: _____

Circle A = Add D = Drop	Course Letters and Section (Example: HUM 131 01)	Instructor Signature *If needed*
A D		
A D		
A D		
A D		
A D		

DO YOU HAVE FINANCIAL AID? YES NO

By registering, I understand that I am financially responsible for the classes for which I am about to register. If I fail to make payment according to the terms of my registration, my account may be charged for collection efforts. These fees may be up to 33% of the unpaid balance of my account. Non-payment or non-attendance does not constitute an automatic drop, withdrawal, or refund.

Student Signature: _____

Students have three primary rights under FERPA. They have the right to: 1) inspect and review their education records; 2) have some control over the disclosure of information from their education records; and 3) seek to amend incorrect education records. JC is FERPA compliant and only releases information to authorized institutions. To not have your directory information released to <http://www.jccmi.edu/norelease>. For more information on this policy, please refer to the JC catalog or go online at www.jccmi.edu. I assume full responsibility for the accuracy of the information on this form and am aware of my FERPA rights.

Student Signature: _____

I understand and assume full responsibility that by adding a class after the add/drop period of this class, I will not have an opportunity to drop without a "W", receive a refund, or utilize certain forms of financial aid. (See the Financial Aid Office for more details.)

Student Signature: _____

JC Staff Signature: _____

I have consulted with this student and approved the process of this add/drop form.