

CHANGE SECTION/LEVEL AFTER OFFICIAL DEADLINE



SAN MATEO COUNTY
COMMUNITY COLLEGE DISTRICT

SMCCCD

Check Appropriate College

- | | | |
|--|---|---|
| <input type="checkbox"/> Admissions
Cañada College
4200 Farm Hill Boulevard
Redwood City, CA94061
Phone: (650) 306-3226
Fax: (650) 306-3113 | <input type="checkbox"/> Admissions
College of San Mateo
1700 West Hillsdale Blvd.
San Mateo, CA 94402
Phone: (650) 574-6165
Fax: (650) 574-6506 | <input type="checkbox"/> Admissions
Skyline College
3300 College Drive
San Bruno, CA 94066
Phone: (650) 738-4251
Fax: (650) 738-4200 |
|--|---|---|

Student's ID# G: _____ Spring Summer Fall Year _____

Last Name _____ First Name _____ Middle _____

Mailing Address: _____

Phone Number: _____ Email: _____

Complete appropriate section below:

After the last day to add a semester-length class a student may change a semester-length class only under unusual circumstances and in one of the specific categories listed below.

1. Changing to a higher or lower level in sequential courses.
2. Changing to a different section of the same course.

I hereby petition to ADD the following course to my program:

CRN	COURSE NAME	COURSE NUMBER	COURSE SECTION	# OF UNITS	Faculty's signature
Sample 81348	Elementary Algebra	MATH 110	AA	5.0	Faculty's signature

I hereby petition to DROP the following course:

CRN	COURSE NAME	COURSE NUMBER	COURSE SECTION	# OF UNITS
Sample 81348	Elementary Algebra	MATH 110	AA	5.0

Student Signature _____ Date _____

Division Dean's Signature _____ Date _____
 (Division Dean's Signature indicates approval of the change of program.)

ADMISSIONS AND RECORDS OFFICE

Processed by: _____ Date: _____ rev 102020