LUZERNE COUNTY COMMUNITY COLLEGE
COURSE CHANGE FORM

It is the student's responsibility to obtain information from the College Catalog relative to the policies appropriate to course changes. These policies include deadline dates for adding courses, withdrawal from the College and the refund policies of the College.

PROCEDURES
1. Secure your counselor's approval for the desired change.
2. Submit this form to the Registrar's Office for processing (Room 516, Building 5).
3. All added courses must be part of the student's declared major in order to meet Financial Aid eligible.

This Course Change Form may be submitted in-person or through your LCCC student e-mail account.

Failure to follow regulations and procedures on the date specified will result in a loss of credit, a grade of "F" or a loss of refund.
The date this form is received in the Registrar's Office is the effective date to comply with procedures.

If you receive Veteran Benefits, please report to the Veteran Affairs Office, Building 5, Room 508. Your financial aid maybe affected.

Name: _____

Student I.D.: _____ **Phone:** _____

Curriculum: _____

COURSE(S) DROPPED			COURSE(S) ADDED		
COURSE NO. & SECTION	COURSE TITLE	SEM. HRS.	COURSE NO. & SECTION	COURSE TITLE	SEM. HRS.

Credit hour load before change _____   Credit hour load after change _____

Term: ❑ Fall   ❑ Spring   ❑ Summer I (4, 6, 8 or 11 weeks)

❑ Summer II (4 or 6 weeks)   ❑ Winter Intersession   Year _____

Student Initial _____ I am aware this change may affect my financial aid

_____ I chose not to see my counselor

_____ I am aware it is after the refund period

Student Signature: _____ **Date:** _____

Reason for Change: ❑ College   ❑ Student   **Comment:** _____

Counselor's Approval: _____ **Date:** _____

Registrar's Office: _____ **Date:** _____