



Spring 2012 **DROP/ADD** Form

Today's Date _____

Name _____

Complete Mailing Address: _____

Student ID Number _____

Semester & Year _____

Social Security No. _____

CHANGE OF CLASS SCHEDULE IS NOT OFFICIAL UNTIL THIS FORM IS SUBMITTED TO THE ADMISSIONS OFFICE.										
CLASSES TO BE DROPPED						CLASSES TO BE ADDED				
Class Nbr	Course	Section	Credit Hrs	Grade	Instructor's Initials		Class Nbr	Course	Section	Credit Hrs

Are you withdrawing from all of your classes? Yes No *(If Yes, please complete the Early Exit Form on the Reverse of this form)*

Please check the reason(s) for dropping the course(s):

Obtained a job

Was your employment unsubsidized (not directly paid whole or in part by funds provided under WIA or other public assistance, e. g. Welfare to Work)?

Yes No

How many hours per week?

Hourly salary range

- \$6 – 8 per hour
- \$9 – 11 per hour
- \$12 – 14 per hour
- \$15 – 17 per hour
- Over \$18 per hour

- Transferring to another institution
- Course load too heavy
Number of hours _____
- Did not attend class regularly
- Relocation
- Personal / family reasons
- Transportation problems
- Day care problems
- Medical problems
- Financial reasons

- Schedule Conflicts
- Were not satisfied with college because *(please check one or more)*
- Instructor(s)
- Coursework too advanced
- Problems with administration

Do you intend to:

- Return to ACTC
- Attend another college
- Not attend college

IMPORTANT DATES

Last Day to Withdraw from a Class and receive a 100% Refund
Last Day to Withdraw from a Class and receive a 50% Refund
Last Day for Students to withdraw from a course WITHOUT Instructor's Signature
Last Day for Students to withdraw from a course for Spring 2012 Semester

Friday, January 13, 2012
Wednesday, February 8, 2012
Monday, March 5, 2012
Friday, April 27, 2012

* The college offices are open Monday-Friday only. Weekend activity is online only.

Receiving Financial Aid Yes No _____
 (Grants, Loans, etc.) Financial Aid Official

Receiving Veterans Benefits Yes No _____
VA or Fin Aid Officer

Original Hours Enrolled _____ Hours Remaining _____

Fee Assessment \$ _____

OFFICE USE ONLY

Date Received _____

Date Processed _____

Processed By _____

STUDENTS SIGNATURE _____

COUNSELOR/ADVISORS SIGNATURE _____

Are you a participant in the Student Support Services Program?

Yes No

Student Support Services Signature

Please check the college services you have used:

Library Academic Advising Counseling Learning Assistance Center
 Tutoring Financial Aid Math Lab

To whom have you spoken to about dropping this course?

Instructor Advisor Counselor

EARLY EXIT FORM

Our college wishes to assist you to continue, change or return to your current program. We value you, your hopes, and your possibilities. The purpose of this is to provide us with basic information that will help us improve and provide information about your immediate plans.

Even though it is optional for you to complete this form, we encourage you to do so. Thank you for helping us do a better job.

1. Why are you leaving?

- a. Obtained a job
 \$6 - \$8 per hour
 \$9 - \$11 per hour
 \$12 - \$14 per hour
 over \$18 per hour

Is the job related to courses taken at the college Yes No

Was your employment unsubsidized (not directly paid in whole or in part by funds provided under WIA or other public programs, eg. Welfare to Work)? Yes No

- b. Transferring to another educational institution
c. Were not satisfied with college because (please check one or more):
 of the instructor(s)
 problems with the administration
 coursework was too difficult
 other
d. Mandatory Placement
e. Personal
f. Family
g. Transportation
h. Financial
i. Schedule Conflicts
j. Child Care
k. Relocation
l. Medical

2. How would you rate your educational experience?

- a. Very Satisfied
b. Satisfied
c. Neutral
d. Not Satisfied
e. Very Dissatisfied