

Course Adjustment Form

All areas must be completed legibly!

Student Name: _____

TCC Student ID Number: _____ Student Phone Number: _____

Name of High School: _____ Graduation Date: _____ (mo/yr)

Semester (circle one): Fall (main) Spring (main) Summer (B- June Exp.) _____ (year)

Adjustment applies to Permission to Register form dated: _____ (enter date of original permission form)

PLEASE DROP STUDENT FROM THE FOLLOWING COURSE(S):

Section #	Course ID	Course Title	Class Location
			HS/Online/TCC
			HS/Online/TCC
			HS/Online/TCC
			HS/Online/TCC

*dropped course(s) do not count as an attempt; please see Academic Calendar for last day to drop course(s)

PLEASE ADD STUDENT FROM THE FOLLOWING COURSE(S):

Section #	Course ID	Course Title	Class Location
			HS/Online/TCC
			HS/Online/TCC
			HS/Online/TCC
			HS/Online/TCC

*please see Academic Calendar for last day to add course(s) to schedule

_____ **Permission for Early Admit:** This student currently has a high school unweighted gpa of _____. This student meets the 3.50 unweighted high school gpa requirement. This individual has permission to participate in Early Admit Dual Enrollment Program at Tallahassee Community College. I understand and the student understands that this is full time dual enrollment with a minimum of 12 credit hours and a maximum of 15 credit hours each semester.

This individual meets criteria for Early Admit dual enrollment and I recommend that he/she be added in the course(s) listed above. Transcript has been submitted.

School Counselor Name (please print): _____

School Counselor Signature: _____ Date: _____