EVEN EXCHANGE ENROLLMENT REQUEST

Student First Name  Last Name  Student ID or SSNumber  Phone  Semester

A student signature on this form authorizes Admissions and Records staff to adjust enrollment as requested below. The student is responsible to ensure that required signatures/approvals are included, payment is made (if applicable), and this form is submitted by deadlines. All enrollment requests are subject to approval; the student is responsible to check their account in myWNC to determine if the enrollment request was processed, to check for the accuracy of the enrollment (if applicable), and to make payment according to payment deadlines.

Student Signature  Date

For enrollment into full classes, students must contact the appropriate Division Chair Assistant to request permission for enrollment. If approved, the division will grant this permission through myWNC. For requests to add/even exchange a full class, Division approval must be obtained prior to submitting this form.

Even Exchange

During the second week of the semester, only for full-term classes
• Instructor signature or attached email approval required for course(s) to add; form must be submitted within 5 days of instructor approval.
• Courses requested to both drop and add for even exchange must be listed. The number of units requesting to add must be equal to or greater than the number of course units to drop.
• Dropped classes approved for even exchange will be removed from a student transcript.
• Deadline to submit this form for even exchange is the Friday of the second week of the semester. Note: Requests to even exchange courses to move to a higher or lower level within the same discipline will be accepted until the Friday of the fourth week of the semester. The lower level course must be a prerequisite to the higher level course, i.e: requesting to even exchange Math 95 to 96.

Course(s) to add:
1) Course Registration Number (i.e. 32876) : __________ Prefix/Number (i.e. BUS 101) : __________  □ Credit □ Audit
   Is the class full?  □ Yes □ No  If yes, has division approval been granted?  □ Yes □ No
   Instructor Signature: ____________________________________________ Date: __________________

2) Course Registration Number (i.e. 32876) : __________ Prefix/Number (i.e. BUS 101) : __________  □ Credit □ Audit
   Is the class full?  □ Yes □ No  If yes, has division approval been granted?  □ Yes □ No
   Instructor Signature: ____________________________________________ Date: __________________

3) Course Registration Number (i.e. 32876) : __________ Prefix/Number (i.e. BUS 101) : __________  □ Credit □ Audit
   Is the class full?  □ Yes □ No  If yes, has division approval been granted?  □ Yes □ No
   Instructor Signature: ____________________________________________ Date: __________________

Course(s) to drop:
1) Course Number: ________ Prefix/Number: __________

2) Course Number: ________ Prefix/Number: __________

3) Course Number: ________ Prefix/Number: __________