



# Division of Academic Achievement

## Student Support Services

1025 NINTH AVENUE  
GREELEY, COLORADO 80631  
970-348-6000

### Concurrent Enrollment

#### CHANGE / ADD / DROP OR WITHDRAWAL FORM

(After initial district approval)

Date: \_\_\_\_\_

Student Name: \_\_\_\_\_ Current Grade: \_\_\_\_\_

School ID: \_\_\_\_\_ High School: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ College ID (if applicable): \_\_\_\_\_

College to Attend: **AIMS** or **UNC** Term: **FALL** or **SPRING** Year: \_\_\_\_\_

Reason for Change: \_\_\_\_\_

#### Currently enrolled in: (Course listed on application)

Title of Class: \_\_\_\_\_ Credit Hours: \_\_\_\_\_

Subject & Course # (example BUS101): \_\_\_\_\_ CRN (example 21184): \_\_\_\_\_

Title of Class: \_\_\_\_\_ Credit Hours: \_\_\_\_\_

Subject & Course # (example BUS101): \_\_\_\_\_ CRN (example 21184): \_\_\_\_\_

#### Proposed class change:

Title of Class: \_\_\_\_\_ Credit Hours: \_\_\_\_\_

Subject & Course # (example BUS101): \_\_\_\_\_ CRN (example 21184): \_\_\_\_\_

Title of Class: \_\_\_\_\_ Credit Hours: \_\_\_\_\_

Subject & Course # (example BUS101): \_\_\_\_\_ CRN (example 21184): \_\_\_\_\_

#### Drop or Withdrawal:

Title of Class: \_\_\_\_\_ Credit Hours: \_\_\_\_\_

Subject & Course # (example BUS101): \_\_\_\_\_ CRN (example 21184): \_\_\_\_\_

Title of Class: \_\_\_\_\_ Credit Hours: \_\_\_\_\_

Subject & Course # (example BUS101): \_\_\_\_\_ CRN (example 21184): \_\_\_\_\_

Reason for drop or withdrawal: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Counselor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please return to high school counselors**

Director or Designee Signature: \_\_\_\_\_ Date: \_\_\_\_\_