



# Running Start Quarterly Add/Drop Form

Student Name: \_\_\_\_\_

Student ID # \_\_\_\_\_

Quarter/Year: \_\_\_\_\_

**HIGH SCHOOL COUNSELOR ONLY**

Does this change affect the students FTE? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, what is the max credit? \_\_\_\_\_

Comment: \_\_\_\_\_

**INSTRUCTIONS**

1. Complete form and return to the Running Start office
2. Please check your calendar for last day for add/drop dates

**COMPLETE WITHDRAWAL** \_\_\_\_\_

Add/Drop	Class Name Ex: English 101	Item # Ex: 3235	Credits	High School Counselor Signature/Date	Parent Signature/Date	Student Signature/Date

**OFFICE USE ONLY**

Date Processed/Initial: \_\_\_\_\_ Notified: Text: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_ In person: \_\_\_\_\_