

GROSSMONT COLLEGE – LEVEL/SECTION CHANGE CARD

Level/Section changes must be processed by the final drop deadline.

PLEASE PRINT IN INK

Semester _____

Student ID# _____

Name _____
Last First Middle

FROM: _____
Section Number Course Instructor's Signature Date

TO: _____
Section Number Course Instructor's Signature Date

The student is responsible for the accuracy of the information on this form and should call College Connection to verify completion of change.

Student's Signature _____

Date received ____/____/____ By _____ Date processed ____/____/____ By _____