BARBADOS COMMUNITY COLLEGE WITHDRAWAL/ADD A COURSE OR MAJOR

NATIONALITY:				
STUDENT IDENT	IFICATION NUMBER:		YEAR OF ENTRY:	
(Mr/Mrs/Miss)NAN	IELAST NAME	FIRST NAME	MIDDLE INITIALS MAIDEN NAME	
HOME ADDRESS	:			
TELEPHONE NO: (Home)(V		(Work)	(Cell)	
PROGRAMME/MA			FULL-TIME PART-TIME	Ξ
INDICATE MAJOR /COURSE FROM WHICH YOU ARE WITHDRAWING (Students may only withdraw from a course/major within the first four weeks of Semester)				
COURSE CODE	COURSE NAME	CREDITS	REASONS	
			() Time Table conflicts () Excessive work load	
			() Change in career goals	
			() Other (Please specify)	
TO BE COMPLETED BY COUNSELLOR AND DIVISIONAL/DEPARTMENTAL HEAD(S) RECOMMENDED [] NOT RECOMMENDED [] APPROVED [] NOT APPROVED [] Counsellor Date Divisional/Departmental Head Date INDICATE MAJOR/COURSE TO BE ADDED (Students may not add a course/major after the first two weeks of Semester 1)				
COURSE CODE	COURSE NAME	CREDITS	REASONS	
			() Change in career goals () Other (Please specify)	
TO BE COMPLETED BY COUNSELLOR AND DIVISIONAL/DEPARTMENTAL HEAD(S)				
RECOMMENDED [] NOT RECOMMENDED []			APPROVED [] NOT APPROVED []	
Counsello	or Date	С	ivisional/Departmental Head Date	
FOR OFFICIAL USE ONLY				
	Registrar		 Nate	