



**COLLIN COLLEGE Course Add Form**

<b>Semester</b>	
<input type="checkbox"/> Fall 20_____	
<input type="checkbox"/> Wintermester 20_____	
<input type="checkbox"/> Spring 20_____	
<input type="checkbox"/> Maymester 20_____	
<input type="checkbox"/> Summer 1/3 20_____	
<input type="checkbox"/> Summer 2 20_____	

Print Name: \_\_\_\_\_  
 Last First Middle

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

**Course(s) to be Added**

CRN #	Course ID/Section	Course Title	Day/Time
(✓) 1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			

**(✓) Departmental/Dean Approval required. Some courses require additional approval. (Admissions or Advising will inform you when additional approval is needed.)**

Course #	Course #	Course #
Permission Granted for	Permission Granted for	Permission Granted for
_____ Instructor	_____ Instructor	_____ Instructor
_____ Department	_____ Department	_____ Department
_____ Dean & Division Stamp	_____ Dean & Division Stamp	_____ Dean & Division Stamp

Student signature: \_\_\_\_\_ Date: \_\_\_\_\_

Advising Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Staff signature: \_\_\_\_\_ Date: \_\_\_\_\_

Collin County Community College District does not discriminate on the basis of race, color, religion, sex, national origin, age, disability or veteran status. With few exceptions, state law gives you the following rights regarding the information collected by Collin about you: the right to request to be informed about the information, the right to receive and review the information and the right to correct information about you that is incorrect.

Information on this document is subject to change due to policy changes by Federal, State or Collin County Community College District.

Office Use Only:
------------------