

VPCC students who need an override to enroll or drop a specific course(s) should complete this form. The student will complete the first section and then seek approval from Enrollment Management or the Academic Division office for the listed course(s). **Any request for entry after the add/change date or drop for nonpayment must be approved by the instructor of the class and the applicable financial office (i.e., Financial Aid, MVS, and/or Student Accounting).**

Check one: ☐ Summer ☐ Fall ☐ Spring Year _____

To be completed by student (print legibly):

ID#: _____ First Name: _____ Last Name: _____

Cell Phone: _____ Email: _____ @email.vccs.edu

NOTE: By signing below, you agree to the financial obligation tied to your enrollment at VPCC. Payment assessed for tuition, fees, and other associated costs are due by the deadline posted on the web; thereafter, payment is due immediately. Refer to the Academic Calendar for the add/change/drop deadlines.

Signature: _____ Date: _____

Instructions for re-enrolling when dropped for nonpayment after add/drop date:

Step 1: Enter the class information under Add/Enroll and have each instructor sign the form agreeing to allow student to re-enroll and return form to student.

Step 2: After all instructors sign, student takes completed form to the applicable financial office (Financial Aid, MVS, and Student Accounting) for their approval.

Step 3: Student then emails form to registration@vpcc.edu.

Add/Enroll

Class # (4-5 digits)	Subject/Catalog # (ex. ENG 111)	Section (ex. 01H)	Credit Hours (ex. 3)	Day/Time (ex. T/Th)	Instructor Name	Instructor Signature	Date

OR

Drop/Swap

Class # (4-5 digits)	Subject/Catalog # (ex. ENG 111)	Section (ex. 01H)	Credit Hours (ex. 3)	Day/Time (ex. T/Th)	Instructor Name	Instructor Signature	Date

To be completed by authorized College Official:

Type of Oversight: ☐ Class Link ☐ Closed class ☐ Pre-requisite ☐ Service Indicator* ☐ Unit load

*cannot override negative service indicators without the approval of the person/dept that placed it.

Provide detailed justification (mandatory entry):

Academic Official: _____ Signature: _____ Date: _____
(if applicable)

Financial: _____ Signature: _____ Date: _____

Processor: _____ Signature: _____ Date: _____