PELLISSIPPI STATE COMMUNITY COLLEGE
LEARNING SUPPORT WRITING
COURSE PLACEMENT CHANGE FORM
(Move to a Lower Level Course)

Student's Name ___________________________  Year / Semester ________________________

Campus ID Number _____________________  Phone Number ____________________________

Student requests a lower level course because of difficulty with course.

Instructor recommends a lower level course because of diagnostic data.

COURSE PLACEMENT CHANGE

_________ from ENGL _____ to ENGL ______

_________ from College Level to ENGL 0800 OR ENGL 0820

CONDITIONS OF PLACEMENT CHANGE:
This placement change cannot be rescinded. The student must complete all requirements of the new course placement before enrolling in the next writing course. Note: If the student is repeating a completed course, the most recent grade replaces any previous grade. If the student is receiving financial aid, the financial aid package may not pay for the student to repeat a course which he/she has previously taken and passed.

* I have read and understand the terms of this request.

Student's Signature ______________________________________  Date: ____________

In order to complete this change:
_________ 1. Fill out the above form
_________ 2. Obtain a signature from an appropriate faculty or staff member
_________ 3. Fax the form to the Dean of Transitional Studies (539-7683)
_________ 4. Forward the original to the Dean of Transitional Studies (Mary Monroe-Ellis AL 200)
_________ 5. Give the student a copy of this form and send him/her to Drop/Add to register for the new course

*** This process must be completed before the drop/add period ends. If the drop/add period has already ended, complete steps 1, 2, and 4. Tell the student to enroll in the appropriate course for the following semester.

Signature of Instructor/ Program Coordinator ___________________________  Date

Dean of Transitional Studies
Student Assistance Center Staff/Counselor