DMACC
DES MOINES AREA COMMUNITY COLLEGE
Life's Calling™

Career Advantage Drop/Add Form

Part 1

Use legal name as printed on birth certificate.

Last Name

First Name

Middle Name

Home High School _____ High School Code _____

Part 2

Social Security Number

Birthday _____
Month Day Year

Part 3

Term ❑ Fall ❑ Spring Year

DROP

CRN	Subject	Course #	Credit(s)

ADD

CRN	Subject	Course #	Credit(s)

Part 4

I understand that I have made a change to my official DMACC record. A notation of this change may be displayed on my official DMACC transcript.

Student's Signature_____ Date_____

If student is NOT AVAILABLE for signature, authorized DMACC Advisor or High School Official must sign and indicate how information was confirmed.

OFFICE USE ONLY

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