



# CONTRA COSTA COMMUNITY COLLEGE DISTRICT

**Registration Form**  
Admissions and Records Office

Date Stamp & Operator Initials

Contra Costa College    Diablo Valley College    Los Medanos College

**Student ID Number**

**Term/Year:**

Fall 20\_\_ Spring 20\_\_ Summer 20\_\_

**Last Name** (Please print clearly)

**First Name**

**Middle Name**

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## Course Adds

Section	Course	Units	Time	Add Authorization (Instructor Signature)	Comments
Example: 0001	Engl-001A	3	1-3PM	Only required once the class begins	Office use only

## Course Drops

Section	Course	Units	Reason
Example: 0001	Math-120	3	CM

## Reasons

CA: CA Residency Issues	HM: Health/Medical
CN: Course not needed	CH: Childcare
TD: Class is too difficult	WO: School Workload
TC: Course/Textbook Costs	IN: Instructor Issues
TR: Transportation	TM: Time Management
FH: Food/Housing Challenges	OT: Other

By registering for courses and signing this form I agree to:

- Assume financial responsibility for any charges and/or fees posted to my account.
- Assume responsibility for understanding college policies concerning schedule changes and their impact to refunds, financial aid, and VA eligibility.
- Review "My Class Schedule" in InSite for drop and refund deadlines and college catalog for other policies and procedures.
- Check my InSite email account for important messages.

**Student Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Processed by: \_\_\_\_\_ Date: \_\_\_\_\_

Counselor Signature: \_\_\_\_\_