### Victor Valley College
#### Admissions and Records Office
#### ADD/DROP FORM

**Student Name**

<table>
<thead>
<tr>
<th>Last</th>
<th>First</th>
<th>MI</th>
</tr>
</thead>
</table>

**Address**

**City**

**State**

**Zip Code**

**Phone No.**

**Student ID#**

**Term:**

- Winter
- Spring
- Summer
- Fall

**Date:** 20___

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**IT IS THE STUDENT'S RESPONSIBILITY TO OFFICIALLY ADD and/or DROP FROM a COURSE(S). A drop does not require an instructor's signature.**

Submit this form **IMMEDIATELY** to the Admissions and Records Office for processing.

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### ADD/DROP FORM

<table>
<thead>
<tr>
<th>SECTION #</th>
<th>COURSE TITLE</th>
<th>UNITS</th>
<th>DAYS</th>
<th>TIMES</th>
</tr>
</thead>
</table>

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<tr>
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<th>UNITS</th>
</tr>
</thead>
</table>

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**INSTRUCTOR USE ONLY**

<table>
<thead>
<tr>
<th>INSTRUCTOR'S SIGNATURE</th>
<th>DATE</th>
<th>FIRST DAY OF ATTENDANCE</th>
</tr>
</thead>
</table>

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All registration functions available on:

**Website** – [http://webadvisor.vvc.edu/](http://webadvisor.vvc.edu/)

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**Received by**

**Date**

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**Student Signature**

**Date**

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**Revised 10/2019**