

Mott Community College Class Schedule Worksheet

Student ID # _____

<u>Term</u>
<input type="checkbox"/> Spring
<input type="checkbox"/> Summer
<input type="checkbox"/> Fall
<input type="checkbox"/> Winter

First Name	MI	Last Name
Address	<input type="checkbox"/> Please check if this is a new address	
City/State/Zip	Date of Birth (mm/dd/yy)	
Telephone #		

<u>Method of Payment</u>
<input type="checkbox"/> Cash
<input type="checkbox"/> Check
<input type="checkbox"/> Credit Card
<input type="checkbox"/> Financial Aid
<input type="checkbox"/> UAW/GM
<input type="checkbox"/> Other

I agree to pay for all charges I incur including tuition & non-refundable fees. If I decide not to attend college, these classes **must be dropped by me**. Full refund is through the 7th day from the start of the term. Half refund begins the 8th day and ends the 11th day from the start of the term (Available terms could include: 15 week, 1st Half, Delayed Start, 2nd Half). Dates are subject to change due to holidays and weekends. (See published tuition refund dates for current information). I am aware of the policies pertaining to tuition, refunds, and fees, including charges associated with any changes that I make to this schedule.

Student Signature **Date**

✓ To Drop	Course Section Code	Course Title	Campus Main, SLBC, LAPR, NTC	Course Dates		Credit/Contact Hours		Days	Times		Instructor Signature (if required)
				Begins	Ends	Begins	Ends				
✓	ENGL 101-01	English Comp	Main	mm/dd	mm/dd	3	3	M/T/W/R/F/S	9:00	10:00	

Totals _____

Authorizing Signature* _____ Date _____

*Advisor or Counselor Signature required for all students on Academic Probation
*Students taking more than 18 credits (9 for Spring/Summer) must have the signature of the Dean of the Division that houses their program of study.