

A-State Early College Programs Roster Correction Form

Instructor _____

School _____

FOR OFFICE USE ONLY
Signed/dated final roster rec'd _____

CRN	Course		Class Period (if applicable)

1. Please use a separate form for **each** of your A-State Early College Program courses that needs enrollment changes.
2. Rosters should be checked on the following dates:

<i>Initial Check Date</i>	<i>Final Check Date*</i>
NO ROSTER NEEDED	SIGNED AND DATED ROSTER REQUIRED
FIRST DAY OF A-STATE	FIFTH DAY OF CLASS <ul style="list-style-type: none"> No roster changes can occur after this date. Please use the Course Drop form for withdrawals.

***Please print, sign and date a copy of your FINAL roster and include with the FINAL Roster Correction Form.**

3. After checking your roster, please mark any of the following that apply:

As of _____, my high school roster matches the official A-State roster.
(date)

Please make the following course corrections:

These students should be ADDED to my roster		FOR OFFICE USE ONLY		
Name	ASU ID (if known)	Score Verification(s)	Override?	Date Enrolled

These students should be REMOVED from my roster		FOR OFFICE USE ONLY
Name	ASU ID (if known)	Date Dropped

Instructor Name

Instructor Signature

Date

**PLEASE RETURN THIS FORM AND THE CORRESPONDING ROSTER (only required for final roster check)
TO YOUR HIGH SCHOOL COUNSELOR WHO WILL EMAIL IT TO
A-State Early College Programs at CEP@astate.edu.**