

UNIVERSITY OF WISCONSIN-GREEN BAY
OFFICE OF ADMISSIONS
(920) 465-2111
SCHEDULE CHANGE APPROVAL FORM

Please complete this form and submit it for approval prior to making any class schedule changes during your senior year of high school. Since we evaluate the rigor of your curriculum, especially the rigor of your senior year, when we make an admission decision, changes to your class schedule may have an impact on our admission decision.

Name (print): _____ Date of Birth (mm/dd/yyyy) _____

Course(s) you are dropping:

Subject Area (English, math, etc.)	Full Course Title	Credit Value

Course(s) you are adding:

Subject Area (English, math, etc.)	Full Course Title	Credit Value

Reason for Change:

I understand that my schedule change may impact my admission status to UW-Green Bay.

Your signature: _____ Date (mm/dd/yyyy) _____

High School (print): _____

The above student has discussed his/her schedule change with me, and I approve of the change.

School Counselor (print) _____

Signature: _____ Date (mm/dd/yyyy) _____

Please return this form immediately to:
Office of Admissions
University of Wisconsin-Green Bay
2420 Nicolet Drive
Green Bay, WI 54311

We will review your status and notify you via e-mail within 2 business days acknowledging the receipt of this form and whether your proposed schedule change will have an impact on your admission decision.