

Application for Course Session Adjustment

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email]

[Your Phone Number]

[Recipient's Name]

[University's Name]

[University's Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I am writing to formally request an adjustment to my current undergraduate course session for [Course Name or Program]. Due to [briefly explain your reason, e.g., personal circumstances, health issues, scheduling conflicts], I believe it is necessary to alter my course schedule to better align with my situation.

I am currently enrolled in [List current courses or session details], and I would like to request a change to [Specify desired courses or desired session]. I believe that this adjustment will enhance my academic performance and overall well-being.

I have attached relevant documents for your consideration and would be grateful for your understanding and support. I am hopeful for a favorable response and am willing to discuss this matter further if needed.

Thank you for your time and consideration.

Sincerely,

[Your Name]

[Your Student ID]