



REQUEST FOR LATE CLASS ADD

Name _____
Please Print

ID Number _____

Date form completed _____ Check One: Freshman ___ Sophomore ___ Junior ___ Senior ___ Graduate ___

Course Prefix: _____ Course Number: _____ CRN Number: _____ Credit hours: _____

Are you currently registered in the cross-listed version of the requested class? (Ex. currently in 400-level, changing to 500-level)

Yes: ___ No: ___

If yes, **do not drop the cross-listing**. The Registrar's Office will drop this course for you in order to prevent paying for the class twice.

Signature of Instructor for added Class(es) _____

Signature of Your Advisor _____

Signature of Department Chair of added class _____

GRADUATE STUDENTS ONLY:

Do you have an assistantship? _____

Signature of Dean of Graduate Education and Research _____

Please indicate below why you wish to add the above course(s) late.

Student's Signature

Date

In submitting this form, you agree to be responsible for any additional tuition and fees incurred. This includes the additional tuition cost of moving from an undergraduate course, to the cross-listed graduate version of a course.

DO NOT WRITE BELOW THIS LINE

Add Approved _____ (Yes) _____ (No)

Registrar

Date

Processed by

Date