

REQUEST FOR ENROLLMENT EXCEPTION

Semester: FALL SPRING SUMMER YEAR: _____

Full Name: _____

Student ID _____ OR Last 4 digits of SSN: _____ and DOB: _____

Subject	Catalog #	Section	Class #	Credits	Class Title
<i>CST</i>	<i>110</i>	<i>01</i>	<i>23419</i>	<i>3</i>	<i>Example: Intro to Communication</i>

Enrollment Exception Requested:

1. Request to register for more than 18 credits. ***Approval from Vice President for Academic, Student, & Workforce Education.***
2. Request to enroll in the above-listed course(s) beyond the second attempt. ***Instructor or advisor recommendation. Approval from Vice President for Academic, Student, & Workforce Education. Completion of Special Circumstances Form is required.***
3. Request to audit the above-listed courses(s). Note: audited classes are not counted in student's course load for financial aid. ***Approval from Vice President for Academic, Student, & Workforce Education.***
4. Request to add the above-listed course(s) after the last official date to register; student **HAS BEEN ATTENDING** the class(es) although not officially enrolled. Request must be processed by withdrawal-with-refund date. ***Instructor recommendation and approval from Vice President for Academic, Student, & Workforce Education.***
5. Request to add the above-listed course(s) after the last date to register; student **HAS NOT BEEN ATTENDING** the class(es). Request must be processed by withdrawal-with-refund date. ***Instructor recommendation and approval from Vice President for Academic, Student, & Workforce Education.***
6. Request to add the above-named class(es) after the withdrawal-with-refund date. ***Instructor recommendation and approval from Vice President for Academic, Student, & Workforce Education. Completion of Special Circumstances Form.***
7. Request to withdraw from the above-listed class(es) after the official withdrawal-without -penalty date has passed. A "W" grade is assigned. No refund is made. ***Approval from Vice President for Academic, Student, & Workforce Education. Completion of Special Circumstances Form.***
8. Request to drop the above-listed class(es) after the official withdrawal-with-refund date has passed. Class enrollment is deleted. A refund is made. ***Approval from Vice President for Academic, Student, & Workforce Education. Completion of Special Circumstances Form.***

I wish to be considered for the following enrollment exception(s) marked above.

Student Signature: _____ Date: _____

Instructor/Advisor: Recommendation Signature: _____ Date _____

Vice President: Approved Not Approved Signature: _____ Date _____

Registrar Office: Entered in SIS Contacted Financial Aid Business Office Initials: _____ Date _____

