PETITION TO ADD A CLASS LATE

STUDENT NAME: ____________________________

LAST: ____________________________ FIRST: ____________________________ M.I. ____________________________

STUDENT ID NO.: ____________________________

CRN SUBJ CRSE SEQ DAYS TIMES UNITS INSTRUCTOR

Please check one: ☐ Fall ☐ Spring ☐ Summer TERM: 200

STUDENT COMMENTS REQUIRED:

DETAILED REASON FOR PETITIONING TO ADD A CLASS LATE:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

__________________________________________

STUDENT SIGNATURE

DATE

TO BE COMPLETED BY THE INSTRUCTOR

☐ RECOMMEND APPROVAL ☐ RECOMMEND DISAPPROVAL

__________________________________________

SIGNATURE OF INSTRUCTOR

DATE

INSTRUCTOR COMMENTS REQUIRED:

DETAILED REASON FOR RECOMMENDATION OF APPROVAL:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

__________________________________________

TO BE COMPLETED BY THE DEPARTMENT CHAIR

☐ RECOMMEND APPROVAL ☐ RECOMMEND DISAPPROVAL

__________________________________________

SIGNATURE OF THE DEPARTMENT CHAIR

DATE

TO BE COMPLETED BY THE SCHOOL DEAN

☐ RECOMMEND APPROVAL ☐ RECOMMEND DISAPPROVAL

__________________________________________

SIGNATURE OF THE SCHOOL DEAN

DATE

SCHOOL DEANS: PLEASE FORWARD THIS FORM TO THE REGISTRATION CENTER, SMITH HALL 118 IMMEDIATELY.

FOR OFFICE USE ONLY BY THE REGISTRATION CENTER:

POSTED BY: ____________________________ DATE: ____________________________

Please note: This form may be used only under the circumstances indicated on the cover sheet and must be submitted prior to the first day of final exams.

5M - 04/00 WHITE COPY: Registration Center ★ CANARY COPY: Instructor ★ PINK COPY: Student