

GRADUATE STUDIES
REGISTRATION/ADJUSTMENT PETITION

- x Students requesting a withdrawal from the semester must submit written notice to the Office of the Registrar. A withdrawal request may be made between the first and last day of classes. (Students not in continuous registration must request a waiver of continuous registration for a leave of absence).
- x Retroactive requests of late registration, schedule adjustment, or a semester withdrawal from a previous semester may be submitted by filing the "PETITION FOR REGULATION WAIVER" form.

Decisions for registration and schedule adjustments beyond deadlines are made on an individual basis. Please provide an explanation below, and justification as to the registration action(s) you are requesting. Supporting documentation is required and should be attached. Please complete the 2nd page of this form with your requested registration and/or schedule adjustment.

<hr/> Full Name (Last, First, Middle)	<hr/> UID Number
<hr/> Street Address	<hr/> Department , Program androgramail address
<p>Explanation of registration/adjustment actions and justification reason(s): (attach additional sheet if necessary)</p>	
<hr/> Student Signature	<hr/> Advisor's Signature
<hr/> Date	<hr/> Date
<hr/> (Instructor's Signature (if appropriate))	<hr/> Department Graduate Director's Signature
<hr/> Date	<hr/> Date

TApproved

TNot Approved

Denial Note(s):

Associate Dean's Signature

Date

Please fill in the appropriate information and check the appropriate spaces.

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_____ I have not registered for (semester) _____ (year) _____ and wish to register for the course(s) indicated below:

_____ I am registered for (semester) _____ (year) _____ and wish to adjust my schedule as indicated below (check all that apply):

(Action Code): _____ Add _____ Drop _____ Change Credit Level _____ Change Grading Option _____
(A) (D) (C) (G)

Action Code	Course Prefix	Course Number	Suffix	Section Number	Grading Method	Credit Level
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