| Washington State University ENROLLMENT CHANGE FORM Please complete all sections below and PRINT clearly. | | | ENROLLMENT REQUESTS | | | Pullman Campus | | |
|---|-------|--|---|-------------------------------|--------------------------------------|--|---------|--------------------|
| | | | Year: 20_ | | Term:Fal | l | Spring | Summer |
| | | | Class Number | Subject | Course Nbr/Section | Class Number | Subject | Course Nbr/Section |
| NAME (Last) (F | irst) | (Middle) | | | | | | |
| | | | Action—Please check all appropriate boxes. Action—Please check all appropriate boxes. | | | | | |
| ID NUMBER PHONE | | | Instructor S | Signature Nee | eded to: | Instructor Signature Needed to: | | |
| | | | Add after the 5th day (Variable Cr#) | | /ariable Cr#) | □ Add after the 5th day (Variable Cr#) | | |
| EMAIL ADDRESS | | | Add with time conflict (Instructor of the class you wish to add) | | | □ Add with time conflict (Instructor of the class you with to add) | | |
| | | | | í í | to | the class you wish to add) Change Credit from to | | |
| STUDENT SIGNATURE | | DATE | ☐ Change Credit from to ☐ Audit (Variable Cr#) | | | □ Audit (Variable Cr#) | | |
| | | | □ Audit to Credit | | | □ Audit to Credit | | |
| | | I | □ Change from section to section | | | □ Change from section to section | | |
| Instructions | | | Instructor Signature: | | | Instructor Signature: | | |
| Students: Return this form with appropriate signatures to the academic department offering the course. For example, if you are requesting to add Hist 110, contact the History Department. (A list of department locations is available at www.schedules.wsu.edu.) The department will process your enrollment change by enrolling you or give you permission to enroll in the course. Departments: For the following students, this form must be used to process enrollment changes and submitted as described below. | | | X: | | | X: | | |
| □ <u>Auditing Students</u> . ONLY students approved for auditing courses need to submit this form to the Registrar's Office, French Administration, Room 346. Charge (s) may apply. All other enrollment changes must be processed by the department. | | | X: Other Change Pass/Fail to Letter Graded | | | X: Other □ Change Pass/Fail to Letter Graded | | |
| □ <u>Pass/Fail Students.</u> ONLY students approved for Pass/Fail courses (excluding UCORE/GER's) need to submit this form to the Registrar's Office, French | | | ATHLETES ONLYDR orW | | | REGISTRAR USE ONLY | | |
| Administration, Room 346. All other enrollment changes must be processed by the department. | | Int'l S-A requires Int'l Programs approval | | | Processor's initials: Checked by: | | | |
| | | | Class Number | Subject | CourseNbr/Sec | | | |
| □ <u>Student Athletes</u> . ONLY after the 5th day of the semest this completed form (with appropriate signatures) to the approval. Submit to the Registrar's Office, French Administration of the semestation o | | heir athletic advisor for | Int'l Program | Int'l Programs Approval Date: | | | np | |
| Please process all other student enrollment changes. Thank you! | | | X: | | | | | |
| See the academic calendar (<u>registrar.wsu.edu</u>) or add/drop deadlines (<u>summer.wsu.edu</u>) for | | | | | | | | |

enrollment change deadlines.