



REQUEST TO BE ENROLLED IN A CLASS

Choose Correct Term: FALL SPRING SUMMER Year _____

Student Information

PRINT Last Name First Student ID#

Check all that apply:

- Petition to **repeat** this class has been approved.
- Overload** petition approval. *Requires signature of Dean of Student Support Services.*
Approved to take _____ units Signature _____
- Financial Hold override approval. *Must be accompanied by authorization.*
- Currently enrolled but will receive a grade of "D" or "F" this semester. *Requires instructor's signature.*
Semester _____ Section # _____ Course code _____ Signature _____
- Change grading to pass/no pass option. Section # _____
- Reinstate** class, dropped in error. *Requires instructor's signature.*
Semester _____ Section # _____ Course code _____ Signature _____
- High School** student concurrent enrollment approved.
- Other:

List classes you want to add. You must receive prior approval to be added to the class.

Section #	Course Code	Course Name	Authorized Signature <i>if required</i>	Date

Student Signature Statement

I have received the proper authorization and I give my permission to Admissions & Records to add these classes to my class schedule. I understand my financial responsibilities regarding my class schedule.

Student Signature _____

Date _____

OFFICE USE ONLY

Processed by _____

Picture ID Verified

Date: _____