

# UNIVERSITY EXTENDED EDUCATION

For office use only:

Received by \_\_\_\_\_

Date \_\_\_\_\_

## Petition for Late Addition of a Class

Please Print

Last Name _____		First Name _____	CWID or SSN# _____
Address _____		( ) _____	Home Telephone _____
City _____	State _____	Zip Code _____	( ) _____
Email _____			Work/Other Telephone _____
			( ) _____
			Cell Phone _____

Please explain why you wish to add this course after the established deadline. If you need more space you may use the back of this form. Be specific and give as much detail about the circumstances as possible. In some cases an immediate decision will be made, otherwise you will be notified by mail within 5 to 10 working days.

**Checks are not accepted for late adds.**

Subject Area & Catalog number _____	Class number _____	Semester Taken _____
_____		
_____		
_____		
_____		
_____		
_____		
_____		

### Approvals:

**Instructor:**       Approved     Denied    Signature \_\_\_\_\_      Date \_\_\_\_\_

**Dept. Chair:**       Approved     Denied    Signature \_\_\_\_\_      Date \_\_\_\_\_

**Academic Advisor:**       Approved     Denied    Signature \_\_\_\_\_      Date \_\_\_\_\_

**Students must register according to published deadlines. Enrollment is on a "space available" basis and is determined at the time of registration.**