



ENROLLMENT CHANGE REQUEST
ARIZONA STATE UNIVERSITY
 UNIVERSITY REGISTRAR'S OFFICE

Please see <https://students.asu.edu/drop-add> for important information about enrollment requests and deadlines. **Adding a class after the drop/add deadline** is considered a "Late Add" and requires instructor, department, and college approval. **Policies and procedures for late adds** vary by college/school offering the course, see <https://students.asu.edu/lateregistration/all> for detailed instructions. Consult the Academic Calendar at <http://students.asu.edu/academic-calendar> for drop/add/withdrawal deadlines.

ASU ID NUMBER:	NAME (LAST, FIRST, M.I.):	DATE:
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Changing your enrollment status may affect your financial aid. Contact Student Financial Assistance at 1-855-278-5080 for advisement on how your financial aid may be affected. Also see <http://students.asu.edu/policies/census> for information on how enrollment changes may affect your financial aid.

Are you an International Student with an F1 or J1 visa? (Check One) Yes* No
 *Serious immigration consequences may result from withdrawing or dropping below full-time enrollment status. International students with an F1 or J1 visa whose drop or withdrawal will result in less than full-time enrollment must obtain advising from the International Student Office in the Tempe Center, Suite 150. For more information visit <https://global.asu.edu/iss>, or call (480) 727-4776.

INTERNATIONAL STUDENT OFFICE SIGNATURE:	DATE:
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SEMESTER (Check One): Fall Spring Summer **YEAR:**

Initial Registration: Yes No **Academic Career:** Undergraduate Graduate Law

Transaction Type	Class #	Course Subject & Number	For Audit (No Credit)	Units:	Swap with Class #	Units:	For Audit (No Credit)	Instructor's Signature (If Required):
CLASSES TO BE Added →			<input type="checkbox"/>					
			<input type="checkbox"/>					
			<input type="checkbox"/>					
			<input type="checkbox"/>					
			<input type="checkbox"/>					
CLASSES TO BE Swapped/Dropped* → <small>(Students may not drop their last class without adding another).</small>							<input type="checkbox"/>	
							<input type="checkbox"/>	
							<input type="checkbox"/>	
							<input type="checkbox"/>	
							<input type="checkbox"/>	
CLASSES TO BE Withdrawn* →								

STUDENT SIGNATURE:	DATE:	DEPARTMENT APPROVAL STAMP (If Required):
ADVISOR'S SIGNATURE <small>(If Required by Department of Major):</small>	DATE:	
AUTHORIZED SIGNATURE OF COLLEGE/ACADEMIC UNIT OFFERING COURSE <small>(Required for late transactions; authorized signatures are valid for 5 business days):</small>	DATE:	

<p>*If you are dropping or withdrawing from all of your classes or your only class in a given session, you must process a complete session withdrawal form available at http://students.asu.edu/forms/withdrawal. Beginning the first day of each fall and spring semester, undergraduate students must initiate a complete session withdrawal request by contacting the college/school of their major. See http://students.asu.edu/forms/withdrawal for more information .</p>	For Registrar Office Use Only File Date:
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This section must be completed.

Student: By signing below, you acknowledge your understanding and acceptance of the following statements.

The university has an established deadline by which to add classes to your schedule. When adding a class after that deadline, you are accepting responsibility for communicating with the course instructor to determine what work you have missed, whether or not you will be allowed to complete any of that missed work, and by what deadline. The course instructor is not obligated to allow you to submit late work, and your grade in the class may reflect missed assignments. Make sure you have access to course reading materials, as instructors are not obligated to provide you with extended deadlines due to not having the required books.

Student Signature: _____ Date: _____

Instructor: By signing below, you confirm that you have communicated with this student and give permission for the student to be added to your class within 48 business hours of the date of your signature. (An email from the instructor may substitute for the physical signature on this form.)

Instructor Signature: _____ Date: _____