

Student Enrollment Form

Semester/Year _____

Last Name First Name MI Student ID #

Current Address Check if New Address/Phone/E-Mail/Name Phone E-Mail

Add/Enroll -----

| Class # | Subject/Catalog# | Section | Credit Hours | Day/Time | Action/Note/Signature Approval (if needed) |
|---------|------------------|---------|--------------|--------------|--|
| 12345 | ENG 111 | 05 | 3 | M-W/11-11:50 | <i>I.M. Instructor-OK to Enroll</i> |
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Drop/Withdraw -----

| Class # | Subject/Catalog# | Section | Grade/Last Date of Attendance/Signature Approval (if needed) |
|---------|------------------|---------|--|
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Notes/Comments/Mitigating Circumstances

Student Signature/Date: _____ Processed By/Date: _____