

POST-CENSUS RE-ENROLLMENT FORM

RETURN FORM TO THE ONE-STOP (STE 230)

Printed Name: _____

Student ID Number: _____

Semester/Year: _____

Major: _____

Phone Number: _____

Course Schedule to be Enrolled:

Unique Class Number (80921)	Course Prefix & Catalog Number (MATH 1342)	Section Number (.001)	Course Title (Statistics)	Permission Number (If Applicable)	Instructor Signature(s): <small>The course instructor is the primary signatory. The supervising Department Chair may also authorize this form.</small>

Notice to Instructors:

By signing, you are acknowledging that this student is either up to date in the course and has been actively participating **OR** has communicated with you regarding a plan to complete any missed coursework. You are confident they can still earn a satisfactory grade.

By signing, you are permitting their re-enrollment.

Student Agreement

I understand and acknowledge that:

- This form is to be used only to re-enroll in the exact courses and sections I was dropped from due to non-payment.
- I am not permitted to add new courses I was not already enrolled in prior to the Census Date.
- I am responsible for paying all applicable late fees, up to and including the \$250 post-census fee, after I have been re-enrolled.
- I understand that enrolling late in the semester will mean that all work that must be completed, success is my responsibility, and I am choosing to re-enroll.

Student Signature: _____

Date: _____

OFFICE USE ONLY:

PROCESSED BY: _____ **ENROLLMENT DATE:** _____

STUDENT BUSINESS SERVICES IMPACT CONSULTATION PROVIDED BY: _____