

INSTRUCTIONS

1. Complete student name, T-number, signature and date.
2. Complete ALL course information (CRN MUST BE ENTERED).
3. Acquire all required signatures.
 - a. Instructors are approved to sign for courses where instructor permission is required and for closed (full) classes.
 - b. Department signature is required for: department permission, prerequisite overrides, co-requisite overrides, major restriction overrides, permission to take a course without the corresponding lab, and permission to take a lab without the corresponding course.
4. If submitted via fax, MUST be accompanied by a copy of a readable photo ID. If submitted as an email attachment, MUST be from an email associated with the student record within our student information system (BANNER).
5. See the Academic Calendar for all registration related deadlines including add/drop and changes from credit to audit and withdrawals.

Office Stamp

STUDENT INFORMATION:

Name: _____ T-Number: _____
Last First MI (or SSN if you do not know your Student ID#)

Student Signature: _____ Date: _____

ADD

CRN	SUBJ	COURSE#	SECTION	CR	Instructor Approval	Department Approval	Date

COMMENT: _____

DROP/WITHDRAW

CRN	SUBJ	COURSE#	SECTION	CR

By registering for classes, I hereby promise to pay Southern Utah University (SUU), tuition and fees assessed to me for courses, for which I have registered, by the published payment due date for each semester. I agree to pay late fees for any unpaid balance after that date. I understand that if I am unable to pay my tuition and fees in full by the published deadline, I can enroll in a monthly tuition payment plan available through the SUU Cashier's Office.

For any unpaid balance beyond the end of the semester for which charges were incurred, I agree to pay any additional fees and interest charges (not to exceed 10% APR) assessed. Holds will be placed on my school records prohibiting me from registration activities or receiving any University records until my account has been paid in full. In the event I default on this agreement and it becomes necessary to place this account for collection, I agree to pay any additional collection fees, not to exceed 50% of the original principle balance, plus any court costs or attorney fees resulting from the enforcement of this agreement.

Additionally, I agree that SUU shall have the right to offset any monies due to me from SUU against the past due balance. Also, SUU may place a lien on future Utah State tax refunds until all delinquent balance obligations are satisfied. I understand that SUU will use any communication network available to contact me during the collection process.

CREDIT / AUDIT CHANGE

CRN	SUBJ	COURSE#	SECTION	CR	ACTION	Instructor Approval	Date
					<input type="checkbox"/> Audit to Credit <input type="checkbox"/> Credit to Audit		
					<input type="checkbox"/> Audit to Credit <input type="checkbox"/> Credit to Audit		