

REGISTRATION AND ADD/DROP FORM



Texas Wesleyan
OFFICE OF STUDENT RECORDS

registrar@txwes.edu

I. STUDENT INFORMATION

Student Name: _____

Student ID: _____

Phone: _____

Academic Program: _____

Local Address: _____
Street City State Zip

Year: _____ Semester: Summer May
 Fall Winter
 Spring

Emergency Contact: _____
Name Phone Number

Session: I III
 II Extended

II. REGISTER OR ADD A CLASS (Complete the PREREQUISITE OVERRIDE form to enroll in courses you need to override)

				FOR DEPARTMENT USE ONLY		
Subject Prefix (ENG)	Course Number (1301)	Section (01)	Credit Hours (3)	(If required) Check box to indicate reason for signature	(If required) Instructor signature for authorization	(If required) Dean or Dept Chair/Prog Dir signature for authorization
				<input type="checkbox"/> Override late add <input type="checkbox"/> Override closed class <input type="checkbox"/> Override time conflict		
				<input type="checkbox"/> Override late add <input type="checkbox"/> Override closed class <input type="checkbox"/> Override time conflict		
				<input type="checkbox"/> Override late add <input type="checkbox"/> Override closed class <input type="checkbox"/> Override time conflict		
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				<input type="checkbox"/> Override late add <input type="checkbox"/> Override closed class <input type="checkbox"/> Override time conflict		
				<input type="checkbox"/> Override late add <input type="checkbox"/> Override closed class <input type="checkbox"/> Override time conflict		

Total Hours: _____

III. DROP A CLASS (Complete the WITHDRAWAL form to drop ALL of your courses)

				FOR DEPARTMENT USE ONLY	
Subject Prefix (ENG)	Course Number (1301)	Section (01)	Credit Hours (3)	(If required) Check box to indicate reason for signature	(If required) Instructor signature for authorization
				<input type="checkbox"/> Approve drop	
				<input type="checkbox"/> Approve drop	

IV. REQUIRED SIGNATURES

Student Signature

Date

Academic Advisor Signature

Date

For Office of Student Records Use Only

Processed by: _____ Date: _____ Cashier (If required): _____