

LATE SCHEDULE CORRECTION REQUEST

Last Name	
First Name	
U.Va. ID #	
U.Va. email	
Academic Year	<input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third <input type="checkbox"/> Fourth

Association: Are you or were you ever an

- Echols Scholar Student Athlete
 Transfer Student Visiting International

If none of the above, what was your first-year residence hall? _____

INSTRUCTIONS:

1. **COMPLETE THIS FORM.** Obtain instructor's signature.
2. **ATTACH A STATEMENT** explaining why you must make a change to your enrollments after the applicable deadline. If warranted explain extenuating circumstances to request a waiver of the penalty (see below).
3. **ATTACH A COPY OF YOUR UNOFFICIAL TRANSCRIPT.** You can print this from your SIS account.
4. **RETURN COMPLETED REQUEST** to 104 Monroe Hall.

COURSE INFORMATION								
Class Number (5 digits)	Subject Area	Course # (4 digits)	Class Section	Course Title	Variable Credit	Grading Option (check ONE)		
						Grade	Audit	CR/NC

Semester in which course was taken:
 Fall 20__
 Spring 20__
 Other _____

Action Requested (check ONE):

- WITHDRAW:** student missed both the drop and withdraw deadlines but NEVER ATTENDED the class
 ADD: student attended the class since the beginning of the semester, but does not appear on official roster
 OTHER: (State briefly; attach detailed explanation.) _____

Instructor's Approval Required: _____

INSTRUCTOR (PRINTED)

SIGNATURE

DATE

Number of credits you will be enrolled in after above action: _____

(This form cannot be used to request to carry fewer than 12 or more than 17 credits. You will need an additional form to request a course load exception.)

IMPORTANT NOTICE: Students are responsible for choosing courses in accordance with College policies, for knowing College deadlines and for maintaining the accuracy of their University Records. **This includes verifying the accuracy of their enrollments** before the ADD, DROP, and WITHDRAW deadlines of each semester.

THERE IS AN ENROLLMENT PENALTY for making changes to your enrollments after the applicable deadline. You will be among the LAST students to enroll in classes for next semester. (Or the following semester, if request comes less than two weeks before the next enrollment period begins.) To forego the requested change unless your appeal is successful, check the box below. Your signature below indicates that you have read and understood this notice.

Do not make the requested enrollment change if the penalty will apply. _____

STUDENT SIGNATURE _____ DATE _____

OFFICE USE ONLY

Decision:
 course added
 course deleted
 W assigned
 other _____
 DENIED

Penalty:
 applied
 waived
 N/A _____
Decision recorded: _____

Process:
 enrollment changed in SIS
 GCF to UREG
Processing Date: _____

Notified:
 student emailed
Notification Date: _____