Section Change Registration Form

Important: This form is accepted at the Office of the Registrar only after the official registration add period has ended.

Print name: ____________________________

NUID: _____ _____ - _____ - _____ _____ _____ Date: ____________________________

Email: ____________________________ Day phone: ____________________________

Level: □ Undergraduate Day □ Graduate Day □ College of Professional Studies

TERM AND YEAR

Semester: □ Fall □ Spring □ Summer 1 □ Summer 2 □ Full Summer Year: ____________

Quarter: □ Fall □ Winter □ Spring □ Summer Year: ____________

COURSE INFORMATION

<table>
<thead>
<tr>
<th>Currently registered section</th>
<th>New section</th>
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<tbody>
<tr>
<td>CRN</td>
<td>Subject/Course #</td>
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Reason for section change (mandatory): ____________________________

REQUIRED SIGNATURES

Undergraduate day students

Instructor: __________________________________________ Date: ____________

Authorization to overenroll class if class is full: □ Yes □ No—please contact

Department: __________________________________________ Date: ____________

Graduate day students

Instructor: __________________________________________ Date: ____________

Authorization to overenroll class if class is full: □ Yes □ No—please contact

Graduate school: __________________________________________ Date: ____________

College of Professional Studies students

Academic advisor/program director: ____________________________ Date: ____________

Authorization to overenroll class if class is full: □ Yes □ No—please contact

Registrar’s office personnel

Received by: ____________________________ Date: ____________

5/16/2016