



PERMISSION TO ENROLL IN CLASS AFTER DEADLINE

Student ID (NSHE ID) _____

Last Name _____

First Name _____

Middle Initial _____

Course Registration: The purpose of this form is to request an exception to the Late Registration Policy:

- **Full Term** (16-week) classes: Registration must be completed by 11:59 p.m. prior to the last day of the first week of instruction.
- **Short Term** (less than 16-week) classes: Registration must be completed by 11:59 p.m. on the day before the session begins.

Step 1: Students may appeal the Late Registration Policy based on the following criteria. Please check the appropriate option below.

For Full-Term or Short-Term class

- A course for which the course catalog notes a prerequisite AND specifies that the permission of the instructor and/or department chair and/or program director is required;
- Course requiring auditions/try-outs.
- Course in the Jumpstart concurrent enrollment program or courses designated in a Memorandum of Understanding (MOU).

For Short Term class ONLY

- Course serving as a replacement for a course cancelled within six days of the start of the session.

Step 2: Provide course information Semester _____ Year _____

Course Subject (i.e. PSY 101) _____ Class Number (5 digit #) _____

Class Start date (mm/dd/yy) _____ Class End Date (mm/dd/yy) _____

Step 3: Obtain required approvals (CSN email approvals can be attached to form in place of signature).

Print Instructor's Name _____

Instructor's Signature _____ Date _____

Print Department Chair's Name _____

Department Chair's Signature _____ Date _____

Step 4: Sign form and submit in person to the Office of the Registrar or scan and email form with appropriate signatures to appeals@csn.edu. Students will be notified via primary email address in MyCSN when the appeal is processed. Payment will be due by 11:59pm on the date of registration.

Student Signature _____ Date _____

OFFICIAL USE ONLY

Initial:	Date Processed:	Not processed Reason:
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