# ENROLLMENT REQUESTS

**Pullman Campus**

<table>
<thead>
<tr>
<th>Year:</th>
<th>Term:</th>
<th>Fall</th>
<th>Spring</th>
<th>Summer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Course Subject/ Course # (e.g., COM 101)</td>
<td>Section # (e.g., 01)</td>
<td>Class SLN (e.g., 4355)</td>
<td>Course Subject/ Course # (e.g., COM 101)</td>
<td>Section # (e.g., 01)</td>
</tr>
</tbody>
</table>

### Actions—Please check all appropriate boxes & obtain all appropriate signatures.

**Employee’s Department Head/Chair Signature Needed for ALL CHANGES:**
- Add (Variable Cr#_____) Mtg Times: _______
- Drop OR Withdraw Mtg Times: _________
- Change from section ___ to section ___

**Department Head/Chair Signature:**
X: __________________________
Date Signed: ____________________

### Instructor Signature Needed to:
- Add after the 5th day (Variable Cr#___)
- Add w/time conflict (Instructor of the class you wish to add)
- Change Credit from _____ to ______
- Add as Audit (Variable Cr#___)
- Change Credit to Audit
- Change from section ___ to section ___

**Instructor Signature:**
X: __________________________
Date Signed: ____________________

### Department Chair Signature Needed to:
- Add, if class is full (Variable Cr#___)

**Department Chair Signature:**
X: __________________________
Date Signed: ____________________

### Advisor Signature Needed to:
- Add as Pass/Fail (excluding UCORE)
- Change Letter Graded to Pass/Fail (excluding UCORE)

**Advisor Signature:**
X: __________________________
Date Signed: ____________________

### Other
- Change Pass/Fail to Letter Graded

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**Instructions**

**Students (Staff/Faculty):** Submit this form in person with appropriate signatures to the Registrar’s Office, French Administration, Room 346. The Registrar’s Office will process the request.

- The employee’s Department Head/Chair must sign & date for all changes.
- If the request is to ‘Drop’ or ‘Withdraw’ and it is your last course, you must submit a cancellation of enrollment at www.cancel.wsu.edu.

See the academic calendar at registrar.wsu.edu for all enrollment deadlines.

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**WASHINGTON STATE UNIVERSITY**

**FACULTY/STAFF**

**ENROLLMENT CHANGE FORM**

Please complete all sections below and PRINT clearly.

<table>
<thead>
<tr>
<th>NAME</th>
<th>ID NUMBER</th>
<th>PHONE</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>EMAIL ADDRESS</th>
<th>STUDENT SIGNATURE</th>
<th>DATE</th>
</tr>
</thead>
</table>

### REGISTRAR USE ONLY

Processor’s initials: Checked by: Date Stamp

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*WSU Office of the Registrar Form, August 2019*