

Enrollment Request: Administrative ADD

Instructions: Complete the following form and return it to the appropriate English staff person. (Electronic signatures via <u>DocuSign</u> or Adobe Acrobat are accepted.)

- for graduate classes and GPTI-taught undergraduate classes: Graduate Program Assistant (gsengl@colorado.edu)
- for *faculty-taught undergraduate classes*: Undergraduate Program Coordinator (<u>ssengl@colorado.edu</u>)

1. Student:

I wish to be <u>enrolled</u> in the following class for the ______ semester:

Course and Section Number: ______ (e.g. ENGL 1001-001)

Instructor: ___

Once you've submitted the above information, an English staff person will enroll you in the course at their earliest convenience, assuming that the following conditions are met:

- you have no enrollment holds or time conflicts with other courses you are already enrolled in
- you are not already enrolled in another section of this same course
- you are not already enrolled at your credit limit for the term
- you are eligible to enroll for the term in question
- your enrollment does not violate the classroom fire code capacity

By submitting an enrollment request, you accept all responsibility for any repercussions that result, including *but not limited to*:

- Once you have submitted an enrollment request, a department staff person may enroll you without further confirmation.
- Staff may encounter additional limitations while processing your enrollment request that could delay your enrollment or prevent it from being processed altogether.
- Even if you are COF eligible, *you will not receive any additional* <u>Colorado Opportunities Fund (COF) support</u> *COF funding for classes added after the COF deadline for that semester.* Review the <u>Registrar</u> and <u>Bursar's</u> websites for more details on COF. Please use the contact information posted there if you have any follow up questions about COF.
- The department's ability to late add you to a course *does not change the university's drop deadline policies.* By submitting your consent, you assume all responsibility for any impacts on your tuition and student record. Please review the university's official <u>Academic Calendar</u> to be sure that you understand these deadlines and the corresponding regulations.

Student Name:	Student ID Number:	
Student Email:	(must be a @colorado.edu account)	
Student Signature:	Date:	
2. Instructor:		
I consent to allow	(Student Name) to register for	
(Course and Section Number) in the	semester.	
Print Name:	Signature:	Date:
3. Department Use:	Staff Sign	
speeme override requested.	Staff Signature:	