Registration Activity Form – Office of the Registrar

IMPORTANT! Please read instructions below.

PLEASE PRINT

Year ___________

Fall ☐  Winter ☐  Spring ☐  Summer ☐

Last Name ___________  First Name ___________  Student I.D. Number ___________

☐ Please indicate with an “X” if you are dropping all classes and withdrawing.

☐ Please indicate with an “X” if you do not want to be billed for Student Health Insurance.

Phone Number: _________________________

WSU Email: ____________________________@wright.edu

My initials indicate that I have read the above statements with check boxes.

Add __________  Drop __________  CRN __________  Dept. __________  Course __________  Section __________  Credit __________  Instructor __________  Dept. __________  Pre-Req. __________  Override __________  Audit* __________  Closed Class __________  Approver __________  Signature __________  Date __________

* See back of form

Advisor approval: ____________________________

College approval for greater than 20 undergraduate or 16 graduate credit hrs: ____________________________

Registration Agreement and Promise to Pay

By signing this agreement with Wright State University, I am requesting to be registered for classes and promise to assume financial responsibility for the payment of all my education-related charges and fees associated with my student account and to pay those charges when due. In the event my account becomes past due, I acknowledge that a registration and transcript hold will be placed on my account and my account may be reported to the credit bureau and referred to the State of Ohio Attorney General’s Office for collection. I agree to pay all late fees, collection costs, and attorney fees related to the collection of my account.

Signature __________  Date __________

If faxing this form, you MUST also send a legible photo ID before your request will be processed.

Drop/Add or Withdrawal Procedures

1. Consult Wings Express/class schedule to see if department or instructor approval is required for your registration or if the course has a prerequisite.
2. Consult Wings Express to determine if advisor approval is required for your registration.
3. If class is for audit, instructor signature is required. (Changes from audit to credit or from credit to audit cannot be made after the first week of the quarter or day 2 of a short term).
4. If you are a senior wishing to take a graduate level course, you must get a signed “Senior Permission Form” from the School of Graduate Studies (E-344 Student Union).
5. Closed class permission signatures MUST be dated and are valid for only 7 days. After day 7, a new form must be submitted.
6. University Honors Program approval is required for closed Honors courses.
7. If you register after the first week of a 10-week quarter or after day two of a short term, the instructor’s signature is required. International students must also have a signature from the UCIE.

Note to Faculty

Be sure to check the appropriate permission box(es) and sign the form to authorize registration. A check only in the instructor, department, or audit box will not authorize registration into a closed class.

A reduction in credit hours and withdrawals may affect financial aid.

Questions: Office of the Registrar

Phone: 937-775-5588

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