NON-FUNDED LATE ENROLLMENT

Permission is requested to allow the named student below to late enroll for the indicated semester. It is understood that by allowing the student to enroll after Census date that Texas A&M University-Kingsville will receive no funding from the state for this student or these courses.

Student's Name _____

College: _____ Major: _____

Classification: FR   SO   JR   SR   GR   Semester: _____ Year: _____

Student's Signature _____

CRN #	Course Name	Course #	Section	Semester Hours	Instructor's

Reason for request: _____
_____

CAPACITY OVERRIDE APPROVAL

(Completed by Instructor): Current Enrollment_____   Maximum Enrollment_____

If the diddition or class count is over the exceeded or maximum or fill the department's signature is required.

Department Chair: _____ Date: _____
(required based on course for each college)

Approvals: _____
            Department Chair Signature (required based on course for each college)   Date

            _____
            Dean's Signature (required based on course for each college)   Date

            _____
            Registrar Signature   Date

For Registrar Office Use Only

Processed by:_____   Date_____