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RETROACTIVE ADD

TO BE COMPLETED BY STUDENT:

LAST NAME	FIRST NAME	MIDDLE INITIAL		PERM
U-MAIL ADDR	ESS			() PHONE
COURSE:_	Department	Courses #	*aprollmont number	QUARTER:
*See Denartm	Department	Course # te <u>Schedule of Classes</u>	*enrollment number	GRADE OPTION: D P/NP D LETTER

INSTRUCTOR'S STATEMENT

The student listed above completed the course	Department	Course #
n Quarter/Year	Units (variable-unit courses only)	-
Instructor's Name		
	(please print)	
Instructor's signature		Date

To Students who are seeking RETROACTIVE ADDITION to one or more courses

Changes are not commonly made to the academic record after the conclusion of a term.

You must submit a **written request** <u>and</u> a **statement from each instructor** whose course you want to add.

Your written request (reverse side of this form) must include the following:

- 1. Your name, perm number, u-mail address, and telephone number.
- 2. Identification of the course(s) you wish to add and the academic term(s) affected.
- **3.** An indication of when you began attending the course and your level of participation in it.
- **4.** An explanation of what prevented you from amending your program before the end of the term.

Additional comments from the instructor are often helpful, but you should understand that the final decision rests with the Dean of the College of Letters and Science.

You must submit your written request, the instructor statement(s) and any additional documentation together.

If your request is approved, a \$3.00 processing fee will be charged to your BA/RC account for each course.

RETROADD PET 9/12/16