University of Arkansas
Administrative Change of Registration

Print Form

ID#: _____ Name: _____ Email: _____

Year: _____ Term: _____ College: _____ ☐ GRAD ☐ UGRD

Department or Dean's Office Use Only

Reason for Administrative Action *Form will be returned if appropriate boxes are not checked or has missing information.*

Overrides

- ☐ Full Class (Instructor & Department Head Sign)
- ☐ Class Time Conflict (Instructor & Student Sign)
- ☐ Co/Pre/Dual Requisite (Instructor & Department Head Sign)
- ☐ Consent Required (Instructor Sign)
- ☐ Late Registration (All Sign)
- ☐ Other- See explanation

Adjust Fees ☐ Yes ☐ No

- ☐ Placement
- ☐ Advising Error
- ☐ Lacks Pre-requisite(s)
- ☐ Section (or Class) Cancelled
- ☐ Change of Section or Section Added
- ☐ Waive late registration fee (explanation required)

Final Grade Roster Clean Up Only

- ☐ Never attended. No fee adjustment.

Explanation:

Action	UAConnect Class #	Subject	Catalog #	Section #	Variable Hrs.	Student's Location	Instructor's Signature
EXAMPLE	2992	PHYS	502V	001	2	AR Arkansas	Ray Z. Orback
D							
R							
O							
P							
A							
D							
D							
AUDIT							
AUDIT							

Student's Signature _____ Date _____

Student's Dean's Signature _____ Date _____

Department Head's Signature _____ Date _____

Instructor's Dean's Signature _____ Date _____

Office of the Registrar Use Only

Your request cannot be processed due to

- ☐ Exceeds term limits
- ☐ Change creates a time conflict with_____.
- ☐ Is already in section _____of the same class.
- ☐ The class number does not match class for this term.
- ☐ Has a _____hold.
- ☐ Is missing the Student's Location Indicator
- ☐ Is missing a co/pre/dual-requisite for this add
- ☐ Will be missing a co/pre/dual-requisite if this class is dropped
- ☐ Is missing number of variable credit hours.
- ☐ Missing signature from _____ .

Other Reason:

Posted to UAConnect _____ Date _____

Returned By _____ Date _____