



Late Add Request Form

Submit only after the end of the Add/Drop period.

Complete a separate form for each School

- Business
 Humanities & Soc. Sci.
 Math, Science & Engr.
 Nursing & Allied Hlth.

FALL TERM (Aug - Dec) 20____
 SPRING TERM (Jan - May) 20____
 SUMMER TERM (May - July) 20____

To expedite processing, Please **Print** Clearly

Empl ID: _____ OR Last 4 digits of SSN _____ Daytime Phone Number: (____) _____

Student Last Name _____ Student First Name _____ MI _____ Jr., 3rd, etc. _____

Curricular
 Non- Curricular
 Name of Plan: _____

Origin of Request: Student
 School/Administrator
 Is this a repeat of a request made earlier for this term? Yes No

Instructions: 1) After reviewing the policy on the second page, fill out this form completely. Please **briefly explain the reason(s)** you are making this request. If applicable, attach any additional supporting documentation.

- 2) List the course(s) requested and complete the checklist in full below. 3) Sign the form 4) Submit the form to the appropriate School Dean's Office
 5) You (the student) or the Dean's office must submit this form to the Registrar at the Parham Road Campus, The 105 at the Downtown Campus or Advising Services at the Goochland Campus. 6) If approved, you will be notified via your Reynolds email or text message within 24 hours by the Registrar's Office.

Please Print Clearly				
Courses Requested				
Class ID Nbr	Subject	Number	Section	Class Title
25741	IST	100	01A	Introduction to <u>Example Class</u>

- I have attached a copy of my **Academic Advising Report** which may be found in the SIS Student Center. _____ (Student Initials)
- I have discussed this request with my **academic advisor**, program head, or professional advisor. _____ (Advisor Initials)
- I understand that I am **responsible** for having satisfied all placement testing requirements, prerequisites, and co-requisites prior to this request. _____ (Student Initials) _____ (Advisor Initials)
- I understand that if I am utilizing Financial Aid, courses above must be included on the Academic Advising Report or the applicable substitution form(s) must be requested and approved. _____ (Student Initials) or Not applicable _____ (Student Initials)
- I understand that should my request be granted, **payment is due immediately** upon registration. _____ (Student Initials)
- I understand that I may not attend the class if my name is not on the class roster within three days and I am responsible for contacting the Registrar. _____ (Student Initials)

I have read and completed all items on the checklist prior to requesting the signature of the Dean.

✗ SIGNATURE OF STUDENT: _____ DATE: _____

✗ SIGNATURE OF THE SCHOOL DEAN OR DESIGNEE: _____ DATE: _____

Submit to Registrar's Office or Registrar@Reynolds.edu

For Official Registrar's Office Use Only: Initial _____ Date _____

Late Add Request

Late Add Policy (JSRCC Policy No.1-37)

- Late add activity will occur for schedule adjustment purposes. Schedule adjustments will only be made to a current student's schedule as the result of extenuating circumstances or college need.
- Extenuating circumstances include administrative error; e.g., inaccurate advising of students on course and/or curricular requirements; failure to process financial aid in a timely manner; and failure to process payment of bill in a timely manner.
- Extenuating circumstances do not include a student's failure to do any of the following:
 - pay complete balance of bill on time
 - submit financial aid documents by requested deadlines
 - complete any enrollment transactions within the appropriate timeframe