



**Extended Programs  
Student Registration Form**

**Term:**

**Student ID #:**

**Name:**

*(Please Print) Last First Middle Initial*

**Address:**

*#/Street City State Zip Code*

**Phone:** *home*

*work*

<b>Course for which student is requesting registration: <i>(please print)</i></b>				
<i>Subj. Code</i>	<i>Course#</i>	<i>Section#</i>	<i>CRN</i>	<i>Course Title</i>

Students who cannot complete the courses for which they are registered or submit an official withdrawal form by the drop date, published at <http://www.ualr.edu/provost/calendar/calendar2.asp> , will receive a failing grade on their transcripts.

*I am aware of the above drop/withdrawal policy, and I understand that by signing this document, I am requesting to be registered in the college-credit course(s) listed at the top of this form, and I assume full responsibility for any tuition and fees associated with this registration.*

*Furthermore, if I am registering late (beyond the last official day to register for the semester), I document that I understand that it is my responsibility to make up any missed assignments.*

**Student's Signature:**

**Date:**