

With these changes, I will be enrolled for

the minimum allowed by my school requires the approval of the dean's office.

COURSE ACTION FORM

Graduate School of Arts and Sciences Enrolled Student Office P.O. Box 400772 Charlottesville, VA 22904-4773 http://graduate.as.virginia.edu/ gsasregistrar@virginia.edu

Student Na	ame		S	tudent ID #				
Student en		S	tudent Department	r:				
Action Req	uested:		Add [©] Dro	op Change of Da	ta			
Permiss	restricted	action: uctor required	l					
Course	full							
Instructor	Signature	(required)						
Director of	Graduate	Studies						
The Course using SIS.	Action Forr	n is to be use	d only to m	nake changes in your	schedule tha	at canno	ot be ma	ide by
•		or each course the primary co		d line can be used fo	r a depende	nt discu	ssion se	ection
Class Number (5-digits)	umber Subject Course #		Class Section	Course Title	# of Credits			

Form must be submitted to GSAS via email by the student's department to gsasregistrar@virginia.edu

credits. Approval to go above the maximum or below