Retroactive Course Change Form

This form may be used in a single instance of extenuating circumstances that reasonably prevented a student from changing their course registration prior to the published deadline. The student must provide official and thorough documentation of the extenuating circumstance and the date(s) on which it occurred.

All requests are subject to Registrar’s Office approval. Incomplete submissions will not be reviewed.

Full Name: _______________________________ Student ID (790#): _______________________________

Semester: ☐ Spring ☐ Summer ☐ Autumn Year: _______________________________

Reason for Missing the Published Deadline: (attach additional pages as needed)

__________________________________________________________________________________________

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__________________________________________________________________________________________

__________________________________________________________________________________________

Course Information:

<table>
<thead>
<tr>
<th>CRN</th>
<th>SUBJECT</th>
<th>COURSE #</th>
<th>SECTION</th>
<th>ADD/CHANGE TYPE</th>
<th>CREDITS</th>
<th>GRADE MODE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>e.g. 51242</td>
<td>PSYX</td>
<td>100S</td>
<td>01</td>
<td>e.g. Section Change</td>
<td>3 credits</td>
</tr>
<tr>
<td>New</td>
<td>☐ Traditional</td>
<td>☐ Credit/No Credit</td>
<td>☐Traditional</td>
<td>☐ Credit/No Credit</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current</td>
<td>☐ Traditional</td>
<td>☐ Credit/No Credit</td>
<td>☐Traditional</td>
<td>☐ Credit/No Credit</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Description of Requested Change:

__________________________________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

Please initial each statement after reading:

_______ I acknowledge that I am responsible for paying any tuition and fee charges incurred as a result of the requested change, as well as a $20 late fee assessed if this is a late course add request.

_______ I confirm that I have completed the form, provided the statements of support below, and supplied thorough evidence and documentation.

Student Signature: ___________________________ Date: ___________________________

This form requires statements of support from the instructor(s) of record for the course(s) in question, as well as the student’s assigned advisor. You can obtain these statements via email from their official UM email account. Attach those and the form to submit to registration@umontana.edu.

Statements of support should provide additional context or background and verify circumstances. For retroactive course credit changes, section changes, and adds, instructors must include confirmation whether the student completed the work for the course.

Example: “I confirm that [Student] completed the work for this course to earn # credits. They were unable to request the change in time due to ___ and discussed it with me on ___. I have provided our emails/notes from our meeting/etc.”

Check the box if the statements have been provided:

☐ Instructor Statement of Support Attached ☐ Advisor Statement of Support Attached