PRINT NAME AND ID	LAST NAME		FIRST NAME	INITIAL	7-DIGIT UW-W ID NUMBER
		WIN	S LATE CLASS ADJUST	MENT FORM	
E-Mail A	ddress				
and ther (undergr	n submit the form to the in:	structor of the class. The instructor a	nd department chairperson must sign ar	d date the form, and the	ident should complete his/her section of the form ne dean of the college of the student's major oved, the dean's office will forward the form to the
	fied that the hold has beer				ourse change will be processed. After the student been cleared and the course change form can be
The WIN	NS Late Class Adjustment	Form is intended for the following pur	poses only:		
• All enrol	qualify the student for red A change of section of a change will not result in a	luced tuition/fee charges or a refund of course in the same term and same send ditional tuition/fees unless there are	of paid tuition. ession (note: the change of section must special course fees associated with the	be for the same numb added section.	harges. A unit decrease will not automatically per of units and the same grade basis). A section deadlines or through the UW-W Late Add and/or
			Registrar's Office use only D	ate Received:	Initials:
	Fall 20 Spring		•	next to the approp	riate term.)
Select	Box				
	Unit Change	Class # (4-digit):	FROM Units:	то	Units:
Section Change			FROM Class #(4-digit):	TO Class #(4	-digit):
			Section #:	Sec	tion #:
-	uest that my UW-Whitew arges associated with th	-	o include the class adjustment above	. I understand that I a	m responsible for payment of any tuition and
Student	t Signature:	Date: _	Mailing Address:		
Instruct	or Approval Required:	SIGNATURE	PRINT NAME		Date:
	ment Chairperson /al Required:	SIGNATURE	PRINT NAME		Date:
	f Student's Major val Required:	SIGNATURE	PRINT NAME		Date:
		CICINATOILE	LIZINI INVINE		

STUDENT SECTION