

# OFFICE OF STUDENT ASSISTANCE REGISTRATION ACTION FORM

**PLEASE RETURN TO THE OFFICE OF STUDENT ASSISTANCE (OSA). ANY QUESTIONS CALL 1 (877) 672-1830.**



STUDENT ID NUMBER \_\_\_\_\_ LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_ MIDDLE \_\_\_\_\_  
 If this is a new address/phone #, please indicate what you would like to be updated on your record  Address  Telephone

STREET ADDRESS/P.O. BOX \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

DAY TELEPHONE NUMBER \_\_\_\_\_ EVENING TELEPHONE NUMBER \_\_\_\_\_ MOBILE/CELL NUMBER \_\_\_\_\_ E-MAIL ADDRESS \_\_\_\_\_  
**HOME** LEVEL:  Undergraduate (01)  Doctoral (05) **SEMESTER:**  SPRING (2)  SUMMER 1 (4)  
**CAMPUS:**  New York (1)  Westchester (2)  White Plains (3)  Graduate (02)  Law (03)  Law – LLM (06)  Law – SJD (09)  FALL (7)  SUMMER 2 (5)  
 White Plains (3)  Law (03)  Law – SJD (09)  OTHER \_\_\_\_\_ YEAR: \_\_\_\_\_

**PLEASE COMPLETE: IF YOU ARE MAKING A CHANGE TO YOUR ORIGINAL REGISTRATION, PLEASE STATE THE REASON FOR CHANGE:**  
 (Changes to your credit load may have an impact on Financial Aid, Health Insurance, etc.) All approval signatures **MUST** be entered on second page.

### SECTION A – COURSE(S) TO DROP / WITHDRAW

REG CODE	SUBJECT	COURSE NO.	COURSE REFERENCE NO.	CR.
	ACC	103	10603	3
<b>TOTAL CREDITS:</b>				

### SECTION B – COURSE(S) TO REGISTER / ADD

REG CODE	SUBJECT	COURSE NO.	COURSE REFERENCE NO.	CR.
	ACC	104	10608	3
<b>TOTAL CREDITS:</b>				

I agree to be governed by the conditions that are prescribed in the current Pace University catalog (which I have had the opportunity to read) with respect to the registration of students, scholarship, attendance, payment or abatement of fees, and other policies relevant to Pace University students. To the best of my knowledge, I have answered all foregoing questions truthfully and accurately.

STUDENT'S SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

OSA SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

# REGISTRATION ACTION FORM - PERMISSION TO REGISTER FOR EXCEPTIONS

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U#: \_\_\_\_\_ Name: \_\_\_\_\_  
 Degree/Major: \_\_\_\_\_ Expected Graduation Date: \_\_\_\_\_

If you are requesting permission to register for exceptions (see list below), this form must be completed, along with the reverse side, and submitted to the appropriate dean, chairperson, or advisor for approval. Graduate students please refer to your school catalog for academic policy regarding exceptions.

**◆ CLOSED CLASS** \* If you are currently registered for a different section of the closed class, please indicate.

COURSE REFERENCE NO.	SUBJECT	COURSE NO.	*CURRENTLY REGISTERED C.R.N.	ACADEMIC APPROVAL/DATE

**◆ OUT OF MAJOR COURSE**

COURSE REFERENCE NO.	SUBJECT	COURSE NO.	*CURRENTLY REGISTERED C.R.N.	ACADEMIC APPROVAL/DATE

**◆ OUT OF DIVISION COURSE**

COURSE REFERENCE NO.	SUBJECT	COURSE NO.	*CURRENTLY REGISTERED C.R.N.	ACADEMIC APPROVAL/DATE

**◆ EXCEEDS MAXIMUM CREDIT HOURS**

TOTAL CREDITS APPROVED FOR CURRENT SEMESTER	ACADEMIC APPROVAL/DATE

**◆ SOPHOMORE, JUNIOR OR SENIOR STANDING REQUIRED**

COURSE REFERENCE NO.	SUBJECT	COURSE NO.	*CURRENTLY REGISTERED C.R.N.	ACADEMIC APPROVAL/DATE

**◆ TIME CONFLICT (Please include both courses that are conflicting)**

COURSE REFERENCE NO.	SUBJECT	COURSE NO.	*CURRENTLY REGISTERED C.R.N.	INSTRUCTOR APPROVAL/ DATE	CHAIR APPROVAL / DATE

**◆ UNSCHEDULED COURSE (Tutorial)**

COURSE REFERENCE NO.	SUBJECT	COURSE NO.	*CURRENTLY REGISTERED C.R.N.	DEAN APPROVAL/ DATE	CHAIR APPROVAL/ DATE

**◆ INSTRUCTOR OR CHAIRPERSON SIGNATURE REQUIRED (ex. Internships, travel, etc.)**

COURSE REFERENCE NO.	SUBJECT	COURSE NO.	*CURRENTLY REGISTERED C.R.N.	INSTRUCTOR APPROVAL/ DATE	CHAIR APPROVAL / DATE