Mail to: **Registration and Records**
Waubonsee Community College
Route 47 at Waubonsee Drive
Sugar Grove, IL 60554-9454
FAX to: (630) 466-4964

Date Received _____
Initials _____

LATE ENROLLMENT APPEAL

Late enrollment appeals should be used by students to enroll or re-enroll after classes start.

Requirements for submitting enrollment appeal:

- After the last day to add a class, students will be allowed one appeal per course per semester.
- Payment policy and class start dates are included in college publications and on the college Web site. Students are responsible for knowing these dates.
- If dropped for non-payment, a $50 late enrollment fee plus a minimum of one-half of tuition is due.
- **DO NOT ATTACH PAYMENT TO THIS REQUEST.**
- The Late Enrollment Appeal Committee will notify you of its decision. **Committee decisions are final.**
- **In order to receive full consideration, late enrollment appeals must be received within two weeks of class start date.**

STUDENT INFORMATION:

Name _____ X Number or Social Security No. _____

Address _____ Home Phone _____Cell Phone _____

_____ _____ _____ Work Phone _____
City State Zip Code

SEMESTER: (circle term and fill in year) ***FALL*** ***SPRING*** ***SUMMER*** _____
Year

LIST COURSES THAT SPECIFICALLY RELATE TO THIS REQUEST:

CRN or Ticket Number	Course Name	*FOR OFFICE USE* *Late add*	*Re-Enroll*	*Switch Section*

ARE YOU RECEIVING FINANCIAL AID? (circle one) YES NO

Please Note: Please complete both sides of the form. State your request and supporting explanation for consideration on the reverse side of this page. Attach documentation to support your explanation.

Student Signature _____ Date _____

For Office Use Only

Date	Status	Initials		Date	Status	Initials
	Appeal Rec'd/Logged				Phone Contact	
	Ready to Review				Processed on Computer	
	Reviewed by Committee				Comment Screen Done	

REQUEST AND SUPPORTING EXPLANATION:

(For Office Use Only)

LATE ENROLLMENT APPEAL COMMITTEE

□ Approved

□ Denied

Reasons: