



# Galveston College

## REGISTRATION EXCEPTION REQUEST

### Instructions:

1. The student must obtain form from a Counselor/Faculty Advisor and complete. (A separate form is required for each course).
2. Student must explain why special permission is requested in space provided, attach additional information and/or documentation if necessary, sign, date and submit form to a Counselor/Faculty Advisor.
3. The Counselor/Advisor will enter Cumulative G.P.A., Total Hours Completed and return the form to the student.
4. The student will submit the form to the appropriate Instructor. If approved by the Instructor, the student will submit the form to the appropriate Program Coordinator.
5. The Program Coordinator will review and if approved, will submit to the Vice President of Instruction.
6. If approved, the Vice President of Instruction will return the form to the Office of Admissions for processing.

Semester: \_\_\_\_\_ Year: \_\_\_\_\_ Major: \_\_\_\_\_

Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Phone No. \_\_\_\_\_ Email Address: \_\_\_\_\_

### Request permission for the following:

\_\_\_\_\_ Registration in a closed class:

Course: \_\_\_\_\_ Section #: \_\_\_\_\_ Instructor: \_\_\_\_\_

**And/Or**

\_\_\_\_\_ Register/Add class after deadline (*Payment due upon approval*):

Course: \_\_\_\_\_ Section #: \_\_\_\_\_ Instructor: \_\_\_\_\_

**And/Or**

\_\_\_\_\_ Waive Pre/Co-requisite for a course (TSI requirements CAN NOT be awarded):

Course \_\_\_\_\_

**Reason for request: (Attach additional information/documentation if applicable)**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Student's Signature* \_\_\_\_\_ *Date* \_\_\_\_\_

### **TO BE COMPLETED BY:**

Cumulative GPA: \_\_\_\_\_ Total Hours Completed: \_\_\_\_\_

Approved  Denied \_\_\_\_\_  
Instructor Date

Approved  Denied \_\_\_\_\_  
Division Director/Coordinator Date

Approved  Denied \_\_\_\_\_  
Vice President Date

\_\_\_\_\_ Date  
Office of Admissions Staff