APPENDIX 5

ITEMS 1 THRU 4 AND SHADED AREAS ARE REQUIRED FOR EACH REQUEST. OTHER ITEMS ARE TO BE COMPLETED AS APPROPRIATE

PLEASE USE BALL POINT PEN

OFFICE OF THE REGISTRAR
FORM 23

PURDUE UNIVERSITY

COURSE REQUEST

1. STUDENT I.D. NO. ___ - __ - ____
2. NAME _____ (LAST / FIRST / MIDDLE)
3. TERM/YEAR ___ / __
4. SCHOOL/CLASS ___ / __
5. PROGRAM OF STUDY ___ (MAJOR) ___ (MINOR) ___ (ADVISOR) ___ (T/C)
6. CANDIDATE _____ YES _____ NO
   DO YOU EXPECT TO RECEIVE A DEGREE UPON COMPLETION OF THE ABOVE TERM?
7. LUNCH HOUR REQUESTED _____YES _____NO
8. REGISTRATION FOR: ☐ EXAM ONLY ☐ DEGREE ONLY

8a. _____ UNDERGRADUATE ADVISOR APPROVAL

9. PRIMARY STAFF CLASSIFICATION ___
   THIS STUDENT IS ELIGIBLE FOR STAFF FEES AS GOVERNED BY EXECUTIVE MEMORANDUM B-57 AND IF APPLICABLE, BY THE POLICIES AND PROCEDURES MANUAL FOR ADMINISTRATION OF GRADUATE PROGRAMS.

8b. _____ GRADUATE SCHOOL APPROVAL

9a. _____ CERTIFICATION BY DEPARTMENT HEAD

10. CAR REGISTRATION REQUEST ☐
11. PHONE NO. _____

STATUS MESSAGES		ACTION A-ADD D-DROP M-CHANGE	SEQUENCE	COURSES		ADD/DROP/CHANGE REQUEST						INSTRUCTOR/DEPT. HEAD APPROVAL	
TRANSMIT STATUS	COURSE STATUS			SUBJECT	NUMBER	DIVISION	INST. PREF/ SECT.	VAR. CREDIT	GRADE OPT.	W WF	ENTERED	SIGNATURE(S)	DATE
REQUEST READY ☐			1										
			2										
			3										
			4										
			5										
REQUEST HELD ☐			6										
			7										
			8										
			9										
			10										

COMMENTS

☐ CHECK HERE IF COMMENTS CONTINUE ON REVERSE SIDE

NO. ABOVE	ALTERNATE COURSES						

VARIABLE TITLE COURSES

SUBJECT ___ NUMBER ___ DIV/SECT ___

SUBJECT ___ NUMBER ___ DIV/SECT ___

AUTHORIZATIONS

SIGNATURE OF STUDENT _____ DATE

SIGNATURE OF ADVISOR _____ DATE

OFFICE USE

COURSE STATUS CODES: **O/P OVERSUBSCRIBED/POSITION** **D-ALL DROPS (SEE MANUAL)** **T-SUBSCRIBED** **M-MODIFIED** **F-FUTURE SEMESTER** **X-PROBLEM**