



University of Connecticut School of Law
 55 Elizabeth Street
 Hartford, Connecticut 06105
 860/570-5136
 860/570-5135 (fax)

Enrollment Request

Student's signature below acknowledges their request to be registered for the course(s) listed and the obligation to pay all associated tuition and fees. Students must formally withdraw in a timely manner to avoid any liability for these fees. If courses are oversubscribed, students are placed on waiting lists. Placement in a course is automatic from the waiting list as space becomes available, thus students are responsible for knowing their enrollment status in these courses and dropping waitlisted courses as well if they are no longer interested.

STUDENT INFORMATION

Name and Student ID Number		Year and Division (ex: 2L Evening, Exchange, LLM)	
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COURSE INFORMATION

Enrollment Semester <i>Please indicate term and year.</i>		Course Instructor	
Course Title		Enrollment Action <i>Please indicate if the request is to add or drop</i>	

Enrollment Semester <i>Please indicate term and year.</i>		Course Instructor	
Course Title		Enrollment Action <i>Please indicate if the request is to add or drop</i>	

Enrollment Semester <i>Please indicate term and year.</i>		Course Instructor	
Course Title		Enrollment Action <i>Please indicate if the request is to add or drop</i>	

Enrollment Semester <i>Please indicate term and year.</i>		Course Instructor	
Course Title		Enrollment Action <i>Please indicate if the request is to add or drop</i>	

SIGNATURE

Student Signature and Date	
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For Office Use Only:		
Processor's Initials	Date Received	Date Processed