UWI
OPEN CAMPUS
TRINIDAD & TOBAGO, WEST INDIES

REGISTRATION/LATE REGISTRATION REQUEST FORM

Complete the form legibly using a ballpoint pen.

SECTION A — PERSONAL DATA			
1. Name			
Title	**Surname**	**First Name**	**Middle Initial**
2. Address			
3. Student ID #		**4. Telephone Contact**	

SECTION B – SITE, PROGRAMME & STATUS	
5. Site	**6. Programme**
7. Academic Year	**8. Status** ☐ Full-time ☐Part-time ☐Repeater ☐Other
9. Academic Year/Semester of 1ˢᵗ Registration	**10. Do you expect to complete your programme this academic year?** ☐ Yes ☐ No

SECTION C – STUDENT'S REQUEST

11. Indicate nature <u>of</u> request

ADMINISTRATIYE REQUESTS:

☐ **Late registration**   Academic Yea*r*/Semester: _____

☐ **Change to Registration**   Add (Course Codes): _____

Drop (Course Codes): _____

SECTION D – REASON FOR REQUEST

12. Please provide justification for your request below

_____

_____

_____

_____

_____   _____
Signature of Student   Date (dd/mm/yy*y*y)

☐ **Request Approved.**   ☐ **Request Denied**

13. Please <u>state</u> reason(s) for the decision

_____

_____

_____   _____
Site/Centre Head   **Date *(*dd/mm/yyyy)**

FOR OFFIC*I*AL USE ONLY:

Tuition & Fees

☐ Tuition Number of Credits _____ ☐ Registration Fee   ☐ Caution Fee   ☐ Late Registration Fee

☐ Lab Fee   ☐ Other (specify)

Total Amount Paid _____   Receipt no._____   Balance _____