



AZM UNIVERSITY

PETITION FOR LATE REGISTRATION

Name ID#
Last First Middle

Faculty Major Semester/Year

Registration Information:

Course #	Course Title	Instructor's Name	Credits

Why were you unable to meet original deadlines/make registration in a timely matter?

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.....

Advisor's Comments & Signature (Completion of this section is highly recommended):

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.....

Printed Name Signature Date

Registrar's Office Use Only:

Date Received Approved

Date Processed Return to Advisor

Processed By Signature