## FACULTY REGISTRATION (PERMISSION OF INSTRUCTOR)

## WESTFIELD STATE UNIVERSITY OFFICE OF THE REGISTRAR

Please use this form to register students into courses that require the permission of the instructor or department chair. Please submit one copy as soon as possible and an updated copy at the end of ADD/DROP period for the semester during which the course will be offered. Please note on the second copy the names of any of the originally registered students who have dropped the course, as well as any students who have added it. Students whose accounts have a billing hold will not be registered until their accounts have been cleared.

**COPY 1 DUE:** As soon as possible COPY 2 DUE: As needed no later than the last day of add/drop for the term \_\_\_\_\_\_ Term: \_\_\_\_\_\_Instructor: \_\_\_ Course: (Please print) (Prefix/number/title) ID Student Name Credits Major Please make additional copies of this form if needed. Faculty Signature: Date: