

Registration Request

NOTE: Students should use Student e-Services to add/drop/withdraw from courses.

Founders Hall, Suite 100
700 East Seventh Street
Saint Paul, Minnesota 55106-5000
E-mail: gateway@metrostate.edu
Phone: 651-793-1300

Who needs to use this form?

Students who are unable to add/drop/withdraw from courses before the add/drop/withdraw deadlines through Student e-Services for some unexpected reason.

View the Class Schedule online at www.metrostate.edu/schedule.

Important Notes

- Registration is subject to course availability (review the schedule online at www.metrostate.edu/schedule). Be aware that courses may fill before this form is received and processed.
- Students must adhere to add/drop/withdraw deadlines posted in the Academic/Events Calendar.
- **Registration changes may affect financial aid and/or international student status.**

How to Submit

Submit the completed form to Gateway Student Services by mail or in-person.

Student Information

Name: _____
Last *First* *Middle*

Metropolitan State student ID: _____ Metropolitan State e-mail address: _____@metrostate.edu

Phone (with area code): (H) _____ - _____ - _____ (W) _____ - _____ - _____ (C) _____ - _____ - _____

Are you an international student? Yes No (Staff: If yes, permission to drop/withdraw must be given by International Student Services).

Add Courses

Please refer to the Registration Resource Guide (https://db.metrostate.edu/webapps/drep/registration_resources.pdf) for guidelines related to adding courses.

Course ID	Course Section	Title of Course	Grading Method	Office Use Only
<i>Ex: 000028</i>	<i>DSCI 630 01</i>	<i>Project Risk Mgmt</i>	<i>Graded or Pass/Fail</i>	

Drop / Withdraw Courses

Please refer to the Registration Resource Guide (https://db.metrostate.edu/webapps/drep/registration_resources.pdf) for guidelines related to dropping or withdrawing from courses.

Course ID	Course Section	Title of Course	Office Use Only
<i>Ex: 000028</i>	<i>DSCI 630 01</i>	<i>Project Risk Mgmt</i>	

By signing this form, I understand that I am financially responsible for all applicable tuition and fees.

Signature: _____ Date: ____ / ____ / ____
MM DD YYYY

Questions? Contact Gateway Student Services