Undergraduate Course Add Request
THE UNIVERSITY OF TEXAS AT ARLINGTON
UNDERGRADUATE ADD OR SWAP FORM

Student Name: _____ **Student Degree Program:** _____

Student ID: _____ **Email Address:** _____ **Phone:** _____

This form should be used by undergraduate students requesting to add or swap one or more courses after the late registration period and before the Census date. One form should be completed for each course the student is seeking to add or swap. Signatures are required from the instructor for each course requested, the academic advisor and the student. The student should complete this form in consultation with his/her academic advisor.

The Student's Responsibility to the University
Please review the responsibilities and check to indicate your understanding of each.

❐ I am responsible for paying the tuition and fees (including library, lab, etc. fees) immediately after adding or swapping the following course(s).
   o *Refer to Student Financial Services at www.uta.edu/fees or 817/272-2172 for more information.*

❐ I am responsible for knowing if the academic program(s) in which I am majoring limits the number of attempts I can make toward a class.
   o *Review the UTA Catalog at http://www.uta.edu/catalog/*

❐ If I am a financial aid recipient, I understand that adding or swapping courses could affect the current amount of aid that I receive as well as future eligibility.
   o *Contact the Office of Financial Aid and Scholarships at 272-3561 or www.uta.edu/fao.*

❐ **I have read and understand the information above and in the Undergraduate Catalog and request to add or swap the following course(s) for the _____ term and year.**

Function required: ADD or SWAP	Course Prefix (eg. MATH in MATH 1302-001)	Course Number eg. 1302 in MATH 1302-001)	Section Number (eg. 001 in MATH 1302-001)	Instructor Approval **INSTRUCTOR SIGNATURE REQUIRED**	Date
ADD					
SWAP (Replace this course with the course above)				Instructor permission not required to replace this course.	

* Departments will not override prerequisites or room capacity and may therefore not guarantee enrollment in a course.*

Student's Signature: _____ **Date:** _____

Major Advisor's Signature: _____ **Date:** _____

Printed Advisor Name: _____ **Phone Ext:** _____

Department Signature: _____ **Date:** _____

It is the responsibility of the department offering the course to complete the Add or Swap function in MyMav.