



Late/ Exceptional Change of Registration

Print Clearly or Enter Fields Electronically to Ensure Accurate Entry

Registrar's Office
 SLU Madrid Campus
 Avenida del Valle 34
 28003 Madrid, Spain
 Phone: +34 (91) 554 5858, ext. 277
 Fax: +34 (91) 554 6202
 E-Mail: registrar-madrid@slu.edu

Name: _____
(Last, First, Middle Initial)

Student ID Number: _____ Term: _____
(Banner ID)

Course Changes						
CRN	Subject Code	Course Number	Section Number	Credit Hours	Professor	Change Requested <i>(Dean's Office Only)</i>
Hours Before Change: _____		Hours After Change: _____		Comments:		
Indicate your Home School:		Provide Flight Information:				
		<ul style="list-style-type: none"> • Number: • Date: • Time: 				
Signature						
Student: _____				Date: _____		

Instructions

This form is used for Changes in Registration / Grades due to exceptional circumstances, such as Incompletes and Withdrawals after the deadline. Once the form is completed, take it to the Dean's Office for approval.

Students:

Complete the first block of the form, Student Information.

- Student ID Your 9 digit student ID number

Complete the second block of the form, Course Changes.

Please remember to include:

- Course Information (CRN, Subject, Course number, Section)

Sign and Date the form at the bottom.

Take it to the Dean's office (San Ignacio Hall, 3rd Floor).

Form availability:

- Registrar's Office (Padre Arrupe Hall, 1st floor. Avenida del Valle 34).
- Advising (San Ignacio Hall, 3rd Floor. Calle Amapolas 3).

Do not hesitate to contact us if you have any questions regarding this process. Our contact information is on the right side of this page.

Contact Information for the Registrar's Office, SLU Madrid Campus:

Registrar's Office
Saint Louis University, Madrid Campus
Padre Arrupe Hall, 1st floor
Avenida del Valle 34
28003 Madrid, Spain
Fax: +34 (91) 554 6202
Phone: +34 (91) 554 5858, ext. 277
E-mail: registrar-madrid@slu.edu