Hampton University Hampton, Virginia 23668

Adding Students to Closed Classes

Department	Date	
I hereby grant permission to add		,
	Student Name	Student ID#
to	, which is closed.	
Course/Section/CRN#/Credi	t Hours	
	Student Academic Advisor Signature	
	Instructor Signature	
ş.	Department Chair Signature (Where Course is offered	
	School Dean Si nature	(Where Course is offered)
Total Semester Credits		
Steps that the student take in process 2) Obtain Student's Academic Advischool of Dean where the course is confice.	or s Si nature 3) Secure si na	ture of Instructor, Chair, and
	Stude	ent's Signature
	Student	's Phone Number
	Date	