



## UNIVERSITY OF MASSACHUSETTS LOWELL

### Wait List Request

**This form is only for courses offered through Continuing Education.**

For students who wish to be added to a waiting list for a particular course the following must be filled out and returned to the Registrar's Office by the first day of classes for that semester.

Please add me to the waiting list for course:

Title: \_\_\_\_\_

Subject #: \_\_\_\_\_ Catalog #: \_\_\_\_\_ Section #: \_\_\_\_\_

Please check: \_\_\_\_\_ Fall \_\_\_\_\_ Spring \_\_\_\_\_ Summer

I understand that I will not be notified when and if I am moved from the waiting list and enrolled in the course.

I understand that I must check my enrollment at: <http://www.uml.edu/it/isis/> to see if I have been enrolled in the course.

I understand that I am responsible for any and all tuition and fees for courses I am registered for and not dropped by the deadline date posted on the academic calendar.

\_\_\_\_\_  
Name - print

\_\_\_\_\_  
ID or Social Security Number

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Please fax this form to (978) 934-4076  
or mail to:  
University of Massachusetts Lowell  
Registrar's Office  
883 Broadway Street  
Lowell, MA 01854-5129